



Long Term Services and Supports Program Compendium

Federal Agencies and Departments Supporting California’s Long-Term Services and Supports System	
<i>U.S. Department of Health and Human Services (DHHS)</i>	DHHS is the primary federal agency responsible for health and human services, including long-term care services. Within DHHS are the Centers for Medicare and Medicaid Services and the Administration on Aging, the two primary agencies that have direct responsibilities related to long-term care. Several other agencies and departments are involved in long-term care including the Health Resources and Services Administration, the Department of Labor, and the Department of Housing and Urban Development.
<i>Centers for Medicare and Medicaid Services (CMS)</i>	CMS administers the Medicare program and the federal portion of the Medicaid program. In addition, CMS coordinates state licensing and certification of health facilities, including long-term care facilities.
<i>Administration on Aging (AoA)</i>	The AoA administers the federal Older Americans Act (OAA), which provides funding for an array of community services including congregate and home-delivered meal programs for persons 60 and over through mandatory state units on aging that, in turn, allocate the funds to local Area Agencies on Aging.
California State Agency/Departments Supporting California’s Long-Term Services and Supports System	
<i>California Health and Human Services Agency (CHHS)</i>	CHHS oversees departments that provide a range of health care services, long-term care services, social services, mental health services, alcohol and drug treatment services, income assistance and public health services, including the Department of Health Care Services (DHCS), the Department of Aging (CDA), the Department of Rehabilitation (DOR), the Department of Mental Health (DMH), the Department of Social Services (DSS), the Department of Public Health (DPH), and the Department of Developmental Services (DDS).
<i>Department of Health Care Services (DHCS)</i>	DHCS is responsible for administering Medi-Cal, California’s Medicaid program that provides health care services for low-income individuals including families with children, seniors, persons with disabilities, foster care, pregnant women, and low income people with specific diseases such as tuberculosis, breast cancer or HIV/AIDS. Medi-Cal is financed by the state and federal government and is the largest funding source for long-term care services in the state. Medi-Cal covers institutional long-term care as well as home and community-based services (HCBS) through Medi-Cal “Optional” State Plan services, and Medi-Cal waivers.
<i>California Department of Aging (CDA)</i>	CDA administers programs that serve older adults, adults with disabilities, and family caregivers. CDA contracts with a network of 33 Area Agencies on Aging, which directly manage a wide array of federal and state-funded services that help older adults find employment; support older adults and adults with disabilities in the community; promote healthy aging and community involvement; and provide caregiver support. CDA also administers the Multipurpose Senior Services Program(MSSP) and certifies Adult Day Health Care centers/Community-Based Adult Services(CBAS), under an interagency agreement with DHCS.

California Department of Rehabilitation (DOR)	DOR works in partnership with consumers and other stakeholders to provide services and advocacy resulting in employment, independent living, and equality for individuals with disabilities.
California Department of Social Services (CDSS)	CDSS provides oversight, policy, and systems functions for programs providing services to the aged, blind and disabled for programs including In-Home Supportive Services (IHSS – see Medi-Cal state plan description) and Adult Protective Services (APS). In addition, CDSS’ Community Care Licensing Division provides oversight and enforcement for more than 85,000 licensed residential facilities statewide serving such clients as children, parents and the elderly.
California Department of Public Health (CDPH)	CDPH is responsible for licensing and certification of health care facilities and nursing homes, as well as a variety of other public health programs, including the Alzheimer’s Disease Program that provides services to persons with Alzheimer’s disease and related disorders and their families through the Alzheimer’s Disease Research Centers of California and research funding to scientists engaged in the study of Alzheimer’s disease and related disorders through the Alzheimer’s Disease Research Fund.
California Department of Developmental Services (DDS)	DDS provides services and supports to individuals with developmental disabilities including mental retardation, cerebral palsy, epilepsy, autism and related conditions. Services are provided through state-operated developmental centers and community facilities, and contracts with 21 nonprofit regional centers. The regional centers serve as a local resource to help find and access the services and supports available to individuals with developmental disabilities and their families.
California Business, Transportation and Housing Agency	The Business, Transportation and Housing Agency oversees several departments that impact the long-term care service system, including the California Housing Finance Agency, the California Department of Transportation, and the Department of Housing and Community Development.
California Health and Human Services Agency Program Initiatives	
Olmstead Advisory Committee	The Olmstead Advisory Committee, comprised of advocates, consumers and other stakeholders, advises on issues related to the state’s implementation of the U.S. Supreme Court’s Olmstead decision. ¹
Alzheimer’s Disease and Related Disorders Advisory Committee (ADRDAC)	The ADRDAC was established through statute in 1988 to provide ongoing advice and assistance to the Administration and the Legislature on the program needs and priorities of individuals affected by Alzheimer’s disease or related disorders.
California Aging and Disability Resource Connections (Cal-ADRCs)	The Cal-ADRC model assists individuals with disabilities and/or chronic conditions in accessing health care, medical care, social supports, and other LTSS. ADRCs offer enhanced information and referral, long-term care options counseling (one-on-one decision support across all networks), short-term service coordination (when there is an urgent need for support until a longer term arrangement can be made), and access to information..

¹ In 1999, the U.S. Supreme Court ruled in the case of *Olmstead v. L.C.*,¹ finding that the unnecessary institutionalization of people with disabilities is a violation of the Americans with Disabilities Act of 1990 (ADA).

California Department of Health Care Services (DHCS) Programs/Services

<p>Medi-Cal State Plan</p>	<p>The Medi-Cal State Plan describes the nature and scope of California’s Medi-Cal program. As required under Section 1902 of the Social Security Act (Act), the Plan is developed by California and approved by the federal Center for Medicare and Medicaid Services (CMS). The Plan is California’s agreement that it will conform to the requirements of the Act and the official issuances of CMS. The State Plan includes the many provisions required by the Act, such as:</p> <ul style="list-style-type: none"> • Methods of Administration • Eligibility • Services Covered • Quality Control • Fiscal Reimbursements.
<p>Medi-Cal “Optional” HCBS State Plan Services</p>	<p>Optional benefits and services are those that the state chooses to provide under the Medi-Cal Program. In most cases, these optional benefits are not required by federal law. Each state offers a different set of optional benefits to its recipients. California’s optional State Plan services include the In Home Supportive Services program (IHSS), Home Health Agency services², and Targeted Case Management³.</p>
<p>Medi-Cal Waivers</p>	<p>Medi-Cal waivers are programs under Medi-Cal that provide additional services to specific groups of individuals, limit services to specific geographic areas of the state, as well as medical coverage to individuals who may not otherwise be eligible under Medicaid rules. DHCS must obtain approval from the federal government to administer Medi-Cal waivers. Requests for new waivers usually require prior State Legislative authorization. The proposed changes must not cost the federal government more than the expected Medicaid costs for the traditional Medicaid population under the same time period. The three types of waivers include the Research and Demonstration 1115 Waiver, 1915 (b) Waiver and the 1915 (c) Home and Community-Based Services Waiver, as follows. <u>Research and Demonstration 1115 Waiver</u>: 1115 waivers are intended to demonstrate and evaluate a policy or approach that has not been demonstrated on a widespread basis. <u>1915 (b) Waiver</u>: 1915 (b) waivers give allow states to mandatorily enroll beneficiaries into managed care programs, or creating a "carveout" delivery system for specialty care. 1915(b) waivers do not have to be operated statewide. <u>1915 (c) Home and Community-Based Services Waiver</u>: HCBS waivers allow states to offer a variety of services to consumers, including a combination of both traditional medical services as well as non-medical services. States can choose the number of consumers to serve. California’s 1915 (c) HCBS waivers include the following:</p>

² HHA services are covered benefits under both the Medi-Cal State Plan and various 1915(c) HCBS waiver programs. Under the state plan, intermittent HHA services can cover short-term assistance with wound care, therapies, and medication monitoring, for example. Under HCBS waivers, HHA and independent nurse provider services can cover shift nursing for long-term, chronic conditions.

³ Medi-Cal provides funding for case management services to help individuals obtain services covered under the Medi-Cal State Plan, such as home health, IHSS, and durable medical equipment, as well as through other public and private providers, such as emergency food and housing. Covered TCM activities also include assessment, services/support planning, and monitoring services and supports. In California, TCM is offered through local governmental agencies that provide services directly or by contracting with non-governmental entities or the University of California.

- Assisted Living Waiver (ALW): The ALW provides home and community-based services in two settings: Residential Care Facilities for the Elderly or in publicly subsidized housing, with services provided by a Home Health Agency. Eligibility is limited to Medi-Cal beneficiaries over the age of 21. Services include, but are not limited to: assistance with activities of daily living; health related services including skilled nursing; transportation; recreational activities; and housekeeping.
- The Home and Community-Based Services Waiver for the Developmentally Disabled (HCBS-DD): The HCBS-DD Waiver provides home- and community-based services to persons with developmental disabilities who are Regional Center consumers and reside in the community as an alternative to institutionalization. This waiver is administered by the California Department of Developmental Services.
- Multipurpose Senior Services Program (MSSP): MSSP provides care management, adult day care, housing assistance, chore and personal care services (if the individual has used the allocated IHSS service hours), protective supervision, respite, transportation, meal services, social services and communication services for Medi-Cal eligible individuals over the age of 65 who meet clinical qualifications for nursing facility admissions. This waiver is administered by the Department of Aging.
- Nursing Facility/Acute Hospital (NF/AH) Waiver⁴: The NF/AH waiver provides community-based alternatives to Medi-Cal eligible individuals who would otherwise be receiving care in either an acute hospital, adult or pediatric subacute facility, nursing facility, or distinct-part nursing facility. There is no age limit for waiver services. The waiver is available to individuals who are currently residing in an institution but wish to transition to his/her home and community, as well as to individuals who reside in the community, but are at-risk for being institutionalized within the next 30 days.
- In-Home Operations (IHO) Waiver: The IHO waiver offers services only to Medi-Cal beneficiaries who were enrolled in an IHO HCBS waiver prior to January 1, 2002, and have physician-ordered direct care services in excess of that available through the NF/AH waiver.

⁴ The NF/AH waiver was previously known as the "NF A/B Waiver" and was renamed the NF/AH Waiver effective January 1, 2007. The NF/AH waiver combines the following three prior Home and Community-Based Waivers: (1) NF A/B waiver; (2) Nursing Facility Subacute (NF SA) waiver; and the In-Home Medical Care (IHMC) waiver.

Department of Health Care Services, Program/Services Continued

<p>Community-Based Adult Services (CBAS) (Formerly Adult Day Health Care/ADHC)</p>	<p>Community–Based Adult Services (CBAS) programs are licensed community-based day care programs providing a variety of health, therapeutic, and social services. This program replaces the Adult Day Health Care program (ADHC) program. Each CBAS center has a multidisciplinary team of health professionals who conduct a comprehensive assessment of each potential participant to determine and plan services needed to meet the individual's specific health and social needs. Services include the following: professional nursing services; physical, occupational and speech therapies; mental health services; therapeutic activities; social services; personal care; hot meals and nutritional counseling; and transportation to and from the participant’s residence. The California Department of Aging (CDA) is responsible for certification of each center for Medi-Cal reimbursement. CBAS seeks to restore or maintain optimal capacity for self-care to frail elderly persons and other adults with physical or mental disabilities and to delay or prevent institutionalization. Established by the Legislature in 1978, CBAS represents one of the early community-based programs aimed at providing support to caregivers and delaying nursing home placement for seniors and adults with disabilities.</p>
<p>California Community Transitions</p>	<p>In January 2007, DHCS was awarded funding by CMS to implement a Money Follows the Person Rebalancing Demonstration called “California Community Transitions” (CCT). CCT allows eligible Medi-Cal beneficiaries who have been receiving services in nursing or other inpatient health care facilities for 90 days or longer to transition to a community setting, if that is their preference.</p>
<p>Caregiver Resource Centers (CRC)</p>	<p>CRCs provide information and referral, short-term counseling, respite care, education, training and support to families and caregivers of persons with Alzheimer's disease, stroke, Parkinson's disease, and other disorders at eleven centers throughout the state. This program transitioned from the Department of Mental Health.</p>
<p>Program for All-Inclusive Care for the Elderly (PACE)</p>	<p>PACE provides medical and supportive services to individuals who are age 55 or older, and who are certified to need nursing home care, but who are able to live safely in the community at the time of enrollment. The program is available in limited areas of the state, with services including:</p> <ul style="list-style-type: none"> • Medical care provided by a PACE physician familiar with the history, needs and preferences of each participant • Adult day care that offers nursing; physical, occupational and recreational therapies; meals; nutritional counseling; social work and personal care • Home health care and personal care in the home • Prescription drugs • Social services • Medical specialty services • Hospital and nursing home care, when necessary <p>An interdisciplinary team assesses participants' needs, develops care plans, and delivers all services (including acute care services and when necessary, nursing facility services). PACE provides social and medical services primarily in a Community Based Adult Services (CBAS) center, supplemented by in-home and referral services in accordance with the participant's needs. The PACE service package includes all Medicare and Medi-Cal covered services, and other services.</p>

California Department of Aging (CDA) Programs/Services

Community-Based Adult Services (CBAS) (formerly ADHC)	CBAS centers are certified for participation in the Medi-Cal Program by the Department of Aging (see program description under DHCS).
Multipurpose Senior Services Program (MSSP)	CDA is responsible for program administration of the MSSP waiver (see program description under DHCS Medi-Cal Waiver).
Nutrition Services	<p>CDA administers nutrition services funded by the federal Older Americans Act and state General Fund dollars through the network of Area Agencies on Aging and their service providers. The programs serve a broad population, with preference given to those in greatest economic or social need. Nutrition services are offered in two settings: congregate and home delivered meals, as follows:</p> <ul style="list-style-type: none"> • <u>Title III C-1: Congregate Nutrition Services</u> provide meals in a group setting. Services also include nutrition and health promotion education, and opportunities for socialization. People eligible for Title III C-1 nutrition services are 60 years of age or older, individuals with a handicap or disability who meet specific criteria, spouses of eligible participants regardless of age, and volunteers who provide needed services during meal hours. • <u>Title III C-2: Home Delivered Meal Services</u> are available to people, age 60 or older, who are homebound by reason of illness, incapacity, or disability, or who are otherwise isolated. Most home-delivered meal programs provide clients with a hot meal five days a week delivered by staff or volunteer drivers.
Senior Community Service Employment Program (SCSEP)	The SCSEP provides part-time work-based training opportunities at local community service agencies for older workers who have poor employment prospects and assists with the transition of individuals to private or other employment opportunities in the community. The program provides a variety of supportive services to the individual such as personal and job-related counseling, job training, and job referral. Individuals who participate in the program must be residents of California, be at least 55 years of age, and have an income that does not exceed 125 percent of the federal poverty level.
The Long-Term Care Ombudsman Program	The Long-Term Care Ombudsman Program investigates and endeavors to resolve complaints made by, or on behalf of, residents in long-term care facilities including nursing homes, residential care facilities for the elderly, and assisted living facilities. The goal of the Long-Term Care Ombudsman Program is to advocate for the rights of all residents of long-term care facilities.
Health Insurance Counseling and Advocacy Program (HICAP)	HICAP offers consumer counseling on Medicare, Medicare supplement policies, Health Maintenance Organizations (HMOs) and long-term care insurance. Local HICAP offices provide free community education and confidential individual counseling statewide.

Family Caregiver Support Program (FCSP)	The FSCP was established under Title III E of the federal Older Americans Act Amendments of 2000. Provided through contract with the 33 Area Agencies on Aging, services include caregiving information, access to services and supports, temporary respite care ⁵ and other support.
Alzheimer's Day Care Resource Centers (ADCRC)⁶	The Alzheimer's Day Care Resource Centers (ADCRC) is authorized under the Older Californians Act; however, there are no longer any General Fund dollars supporting this program. To this end, the local Area Agencies on Aging determine whether and to what extent to fund the program. ADCRCs provide care for persons with Alzheimer's disease and other dementia. 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 to maintain the highest level of functioning.
Brown Bag Program⁵	The Brown Bag Program is authorized under the Older Californians Act; however, there are no longer any General Fund dollars supporting this program. The local Area Agencies on Aging determine whether and to what extent to fund the program. The Brown Bag Program provides surplus and donated fruits, vegetables and other food products to low income individuals 60 years of age and older.
Foster Grandparent Program⁵	The Foster Grandparent Program is an intergenerational volunteer program that provides aid to children and youth with special and exceptional needs.
Linkages⁵	To this end, the local Area Agencies on Aging determine whether and to what extent to fund the program. Linkages serves frail elderly adults and adults with disabilities, age 18 years and older, providing comprehensive care management for individuals who are not eligible for other care management programs.
Senior Companion⁵	The Senior Companion program was established as part of the Older Californians Act; however, there are no longer any General Fund dollars supporting this program. To this end, the local Area Agencies on Aging determine whether and to what extent to fund the program. Under this program, volunteers serve frail older adults and adults with disabilities by providing respite for caregivers, companionship, assistance with simple chores, assistance with grocery shopping and meal preparation, transportation and other services.

⁵ Temporary respite care and support services are offered to a grandparent/older relative caregiver of a child, or to a family caregiver of an older care receiver (60 years of age or older) that has been determined to be functionally impaired due to having two or more limitations in activities of daily living or a cognitive impairment requiring substantial supervision.

⁶ These programs no longer receive any General Fund support, but remain authorized in statute as part of the Older Californians Act. The local Area Agencies on Aging determine whether and to what extent to fund the programs.

California Department of Rehabilitation (DOR) LTC Programs/Services⁷	
Independent Living Centers (ILC)	ILCs are consumer controlled, community based, cross disability, nonresidential private nonprofit agencies designed and operated within local communities by individuals with disabilities. ILCs provide independent living services that seek to maximize a person's ability to live independently in the environment of their own choosing. All ILCs provide six core services: housing referrals; information and referral; peer counseling; personal assistant services; independent living skills training; and, individual and systems change advocacy. DOR oversees the state's network of 29 ILCs, providing technical assistance and financial support. ILCs serve any individuals with disabilities, regardless of age.
Traumatic Brain Injury (TBI) Program	The TBI program provides community reintegration, service coordination, family and community education, vocational supportive services and service coordination services to persons suffering from TBI at seven sites in California.
Vocational Rehabilitation Services	DOR contracts with providers for a range of vocational rehabilitation services including employment services, rehabilitation technology, independence development, and personal support services.
California Department of Social Services (CDSS) Programs/Services⁷	
In-Home Supportive Services (IHSS)	IHSS is a federal, state, and locally-funded program that provides in-home assistance to low-income adults who are over 65 years of age, blind, or disabled, and to children who are blind or disabled. Qualified recipients receive assistance with daily tasks, including bathing, dressing, cooking, cleaning, grooming, and feeding. The IHSS program plays a significant role in helping people remain at home and avoid institutionalization, and serves as a model of self-directed services. County social workers assess individuals using a standardized assessment to determine the need and then authorize service hours per month, based on a functional index score (FIS) of 1 to 5 (1=lowest need; 5=highest need). The consumer directs his/her services by deciding how, when, and in what manner IHSS services will be provided. IHSS is administered at the state level by the state Department of Social Services (through an interagency agreement with the Department of Health Care Services), and at the local level through county human services offices.
Adult Protective Services (APS)	APS assists seniors (65 years and older) and dependent adults (disabled 18-64 year-olds) who are unable to meet their own needs, or are victims of abuse, neglect, or exploitation. County APS agencies investigate reports of physical, emotional, or financial abuse or neglect of seniors and dependent adults who live in multiple settings by family members or other known associates. APS staff evaluate abuse cases and arrange for services such as advocacy, counseling, money management, out-of-home placement, or conservatorship. Reports of abuse that occur in a nursing home, a board and care home, a residential facility for the elderly, or at a long term care facility by provider staff are the responsibility of the Ombudsman's office, under the California Department of Aging's Ombudsman program..
Community Care Licensing (CCL)	The CCL program provides oversight and enforcement of the licensed facilities including Residential Care Facilities for the Elderly (RCFE) and Continuing Care Retirement Communities (CCRC). RCFEs provide care, supervision, and assistance

⁷ The programs highlighted reflect only those provided by the department with direct relevance to home and community-based services. The Department operates a number of other programs and services in addition to those highlighted.

	with activities of daily living to persons 60 years of age and over, as well as persons under 60 with compatible needs. RCFEs include assisted living facilities, retirement homes, and board and care homes. These facilities range from very small (six beds or less) to very large (over 100 beds). CCRCs are licensed RCFEs that provide a long-term continuing care contract for housing, residential services, and nursing care, usually in one location, and usually for a resident's lifetime.
California Department of Public Health (CDPH) LTC Programs/Services⁸	
Licensing and Certification of Nursing Facilities	CDPH is responsible for licensing and certification of health care facilities and nursing homes.
Alzheimer's Disease Program	The Alzheimer's Disease Program provides services to persons and families afflicted with Alzheimer's disease and related disorders through the Alzheimer's Disease Research Centers of California.
California Department of Developmental Services (DSS) Programs/Services	
HCBS-DD Waiver	DDS administers the Home and Community-Based Services Waiver for the Developmentally Disabled (HCBS-DD), which provides home- and community-based services to persons with developmental disabilities who are Regional Center consumers and reside in the community as an alternative to institutionalization.
Developmental Centers	The Department of Developmental Services operates developmental centers that are licensed and certified as Nursing Facility (NF), Intermediate Care Facility/Mentally Retarded (ICF/MR), and acute care hospitals. These facilities provide services and supports for individuals in need of a secure environment or who have special medical and/or behavioral program needs. Admission to one of these facilities requires either a formal determination that the individual meets stringent admission criteria or a court order.
Regional Centers	The regional center delivery system provides access to comprehensive services in the community by coordinating outreach, intake and assessment, preventive services, and case management/service coordination. In addition, regional centers develop, maintain, monitor, and fund a wide range of services and supports.

⁸ The programs highlighted reflect only those provided by the department with direct relevance to HCBS LTC services. The Department operates a number of other programs and services in addition to those highlighted.