

## Community-Based Adult Services Eligibility Criteria

Category	Eligibility 14525	Medical Necessity 14526.1(d)(e)	Daily Core Services 14550.5	Additional References
<p><b>Category 1</b> individuals meet:</p> <ul style="list-style-type: none"> <li>NF-A level of care or above as defined in the Settlement Agreement, Section VI, Page 8 <b>AND</b></li> <li>ADHC eligibility and medical necessity criteria contained in sections 14525(a),(c),(d),(e), 14526.1 (d)(1),(3),(4),(5), <b>AND</b> 14526.1 (e) of the California Welfare and Institutions Code which states that the participant's condition would likely deteriorate if the ADHC services (or CBAS) were denied.</li> </ul>	<p>Any adult eligible for benefits under Chapter 7 (commencing with Section 14000) shall be eligible for adult day health care services if that person meets all of the following criteria:</p> <p>(a) The person is 18 years of age or older and has one or more chronic or postacute medical, cognitive, or mental health conditions, and a physician, nurse practitioner, or other health care provider has, within his or her scope of practice, requested adult day health care services for the person.</p> <p>(c) The person requires ongoing or intermittent protective supervision, skilled observation, assessment, or intervention by a skilled health or mental health professional to improve, stabilize, maintain, or minimize deterioration of the medical, cognitive, or mental health condition.</p> <p>(d) The person requires adult day health care services, as defined in Section 14550, that are individualized and planned, including, when necessary, the coordination of formal and informal services outside of the adult day health care program to support the individual and his or her family or caregiver in the living arrangement of his or her choice and to avoid or delay the use of institutional</p>	<p>(d) Except for participants residing in an intermediate care facility/developmentally disabled-habilitative, authorization or reauthorization of an adult day health care treatment authorization request shall be granted only if the participant meets all of the following medical necessity criteria:</p> <p>(1) The participant has one or more chronic or post-acute medical, cognitive, or mental health conditions that are identified by the participant's personal health care provider as requiring one or more of the following, without which the participant's condition will likely deteriorate and require emergency department visits, hospitalization, or other institutionalization:</p> <p>(A) Monitoring. (B) Treatment. (C) Intervention.</p> <p>(3) The participant's network of non-adult day health care center supports is insufficient to maintain the individual in the community, demonstrated by at least one of the following:</p> <p>(A) The participant lives alone and has no family or caregivers available to provide sufficient and necessary care or supervision. (B) The participant resides with one or more related or unrelated individuals, but they are unwilling or unable to provide sufficient and necessary care or</p>	<p>Adult day health care centers shall offer, and provide directly on the premises, in accordance with the participant's individual plan of care, and subject to authorization pursuant to Section 14526, the following core services to each participant during each day of the participant's attendance at the center:</p> <p>(a) One or more of the following professional nursing services:</p> <p>(1) Observation, assessment, and monitoring of the participant's general health status and changes in his or her condition, risk factors, and the participant's specific medical, cognitive, or mental health condition or conditions upon which admission to the adult day health care center was based.</p> <p>(2) Monitoring and assessment of the participant's medication regimen, administration and recording of the participant's prescribed medications, and intervention, as needed, based upon the assessment and the participant's reactions to his or her medications.</p>	<p><b>NF-A-</b>Defined in California Code of Regulations, Title 22, Sections 51120(a) and 51334(l).</p> <p><b>51120(a):</b></p> <ul style="list-style-type: none"> <li>Require protective and supportive care, because of mental and/or physical conditions above the level of board and care</li> <li>Do not require continuous supervision of care by a nurse, except in brief spells of illness</li> <li>Do not have an illness, injury or disability for which hospital or skilled nursing facility services are required</li> </ul> <p><b>51334(l):</b></p> <ul style="list-style-type: none"> <li>Shall have a <u>medical condition</u> which needs an out-of-home protective living arrangement with 24-hour supervision and <u>skilled nursing care or observation on an ongoing intermittent basis</u> to abate health deterioration.</li> <li>Intermediate care services emphasize care aimed at <u>preventing or delaying acute episodes of physical or mental illness and encouragement of individual patient independence to the extent of his ability.</u></li> </ul> <p>As a guide in determining the need for intermediate care services, the following <u>factors may assist</u> in determining</p>

## Community-Based Adult Services Eligibility Criteria

Category	Eligibility 14525	Medical Necessity 14526.1(d)(e)	Daily Core Services 14550.5	Additional References
<b>Category 1 (Cont.)</b>	<p>services, including, but not limited to, hospital emergency department services, inpatient acute care hospital services, inpatient mental health services, or placement in a nursing facility or a nursing or intermediate care facility for the developmentally disabled providing continuous nursing care.</p> <p>(e) Notwithstanding the criteria established in subdivisions (a) to (d), inclusive, of this section, any person who is a resident of an intermediate care facility for the developmentally disabled-habilitative shall be eligible for adult day health care services if that resident has disabilities and a level of functioning that are of such a nature that, without supplemental intervention through adult day health care, placement to a more costly institutional level of care would be likely to occur.</p>	<p>supervision to the participant.</p> <p>(C) The participant has family or caregivers available, but those individuals require respite in order to continue providing sufficient and necessary care or supervision to the participant.</p> <p>(4) A high potential exists for the deterioration of the participant's medical, cognitive, or mental health condition or conditions in a manner likely to result in emergency department visits, hospitalization, or other institutionalization if adult day health care services are not provided.</p> <p>(5) The participant's condition or conditions require adult day health care services specified in subdivisions (a) to (d), inclusive, of Section 14550.5, on each day of attendance that are individualized and designed to maintain the ability of the participant to remain in the community and avoid emergency department visits, hospitalizations, or other institutionalization.</p> <p>(e) When determining whether a provider has demonstrated that a participant meets the medical necessity criteria, the department may enter an adult day health care center and review participants' medical records and observe participants receiving care identified in the individual plan of care in addition to reviewing the information provided on or with the TAR.</p>	<p>(3) Oral or written communication with the participant's personal health care provider, other qualified health care or social service provider, or the participant's family or other caregiver, regarding changes in the participant's condition, signs, or symptoms.</p> <p>(4) Supervision of the provision of personal care services for the participant, and assistance, as needed.</p> <p>(5) Provision of skilled nursing care and intervention, within scope of practice, to participants, as needed, based upon an assessment of the participant, his or her ability to provide self-care while at the adult day health care center, and any health care provider orders.</p> <p>(b) One or both of the following core personal care services or social services:</p> <p>(1) One or both of the following personal care services:</p> <p>(A) Supervision of, or assistance with, activities of daily living or instrumental activities of daily living.</p> <p>(B) Protective group supervision and interventions to assure participant safety and to minimize the risk of injury, accident, inappropriate</p>	<p>appropriate placement:</p> <ol style="list-style-type: none"> <li>1. The complexity of the patient's medical problems is such that he requires skilled nursing care or observation on an ongoing intermittent basis and 24-hour supervision to meet his health needs.</li> <li>2. Medications may be mainly supportive or stabilizing but still require professional nurse observation for response and effect on an intermittent basis. Patients on daily injectable medications or regular doses of PRN narcotics may not qualify.</li> <li>3. Diet may be of a special type, but patient needs little or no assistance in feeding himself.</li> <li>4. The patient may require minor assistance or supervision in personal care, such as bathing or dressing.</li> <li>5. The patient may need encouragement in restorative measures for increasing and strengthening his functional capacity to work towards greater independence.</li> <li>6. The patient may have some degree of vision, hearing or sensory loss.</li> <li>7. The patient may have some limitation in movement, but must be ambulatory with or without an assistance device such as a cane, walker, crutches, prosthesis, wheelchair, etc.</li> <li>8. The patient may need some</li> </ol>

## Community-Based Adult Services Eligibility Criteria

Category	Eligibility 14525	Medical Necessity 14526.1(d)(e)	Daily Core Services 14550.5	Additional References
Category 1 (Cont.)			<p>behavior, or wandering.</p> <p>(2) One or more of the following social services provided by the adult day health care center social worker or social worker assistant:</p> <p>(A) Observation, assessment, and monitoring of the participant's psychosocial status.</p> <p>(B) Group work to address psychosocial issues.</p> <p>(C) Care coordination.</p> <p>(c) At least one of the following therapeutic activities provided by the adult day health care center activity coordinator or other trained adult day health care center personnel:</p> <p>(1) Group or individual activities to enhance the social, physical, or cognitive functioning of the participant.</p> <p>(2) Facilitated participation in group or individual activities for those participants whose frailty or cognitive functioning level precludes them from active participation in scheduled activities.</p> <p>(d) One meal per day of attendance, in accordance with Section 54331 of Title 22 of the California Code of Regulations, unless the participant declines the meal or medical contraindications exist, as documented in the participant's health record,</p>	<p>supervision or assistance in transferring to a wheelchair, but must be able to ambulate the chair independently.</p> <p>9. The patient may be occasionally incontinent of urine; however, patient who is incontinent of bowels or totally incontinent of urine may qualify for intermediate care service when the patient has been taught and can care for himself.</p> <p>10. The patient may exhibit some mild confusion or depression; however, his behavior must be stabilized to such an extent that it poses no threat to himself or others.</p>

## Community-Based Adult Services Eligibility Criteria

Category	Eligibility 14525	Medical Necessity 14526.1(d)(e)	Daily Core Services 14550.5	Additional References
<b>Category 1 (Cont.)</b>			that prohibit the ingestion of the meal.	
<p><b>Category 2</b> individuals:</p> <ul style="list-style-type: none"> <li>• Have been diagnosed by a physician as having an Organic, Acquired or Traumatic Brain Injury, and/or have a Chronic Mental Illness, as defined by DSM IV TR, Fourth Edition, Text Revision (2000) <b>AND</b></li> <li>• Meet ADHC eligibility and medical necessity criteria contained in sections 14525 and 14526.1(d) and (e) of the California Welfare and Institutions Code <b>AND</b></li> <li>• Notwithstanding sections 14525(b) and 14526.1(d)(2)(A) of the California Welfare and Institutions Code, the individual must demonstrate a need for assistance or supervision with at least: Two(2) of the following ADLs/IADLs: bathing dressing, self-feeding, toileting, ambulation, transferring, medication management, and hygiene, <b>OR</b></li> <li>• One(1) ADL/IADL listed above and money management, accessing resources, meal preparation, or transportation</li> </ul>	<p>Any adult eligible for benefits under Chapter 7 (commencing with Section 14000) shall be eligible for adult day health care services if that person meets all of the following criteria:</p> <p>(a) The person is 18 years of age or older and has one or more chronic or postacute medical, cognitive, or mental health conditions, and a physician, nurse practitioner, or other health care provider has, within his or her scope of practice, requested adult day health care services for the person.</p> <p>(b) The person has functional impairments in two or more activities of daily living, instrumental activities of daily living, or one or more of each, and requires assistance or supervision in performing these activities.</p> <p>(c) The person requires ongoing or intermittent protective supervision, skilled observation, assessment, or intervention by a skilled health or mental health professional to improve, stabilize, maintain, or minimize deterioration of the medical, cognitive, or mental health condition.</p> <p>(d) The person requires adult day health care services, as defined in Section 14550, that are individualized and planned, including, when necessary, the coordination of formal and</p>	<p>(d) Except for participants residing in an intermediate care facility/developmentally disabled-habilitative, authorization or reauthorization of an adult day health care treatment authorization request shall be granted only if the participant meets all of the following medical necessity criteria:</p> <p>(1) The participant has one or more chronic or post-acute medical, cognitive, or mental health conditions that are identified by the participant's personal health care provider as requiring one or more of the following, without which the participant's condition will likely deteriorate and require emergency department visits, hospitalization, or other institutionalization:</p> <p>(A) Monitoring. (B) Treatment. (C) Intervention.</p> <p>(2) The participant has a condition or conditions resulting in both of the following:</p> <p>(A) Limitations in the performance of two or more activities of daily living or instrumental activities of daily living, as those terms are defined in Section 14522.3, or one or more from each category. (B) A need for assistance or supervision in performing the activities identified in subparagraph (A) as related to the condition or conditions specified in paragraph (1) of</p>	<p>Adult day health care centers shall offer, and provide directly on the premises, in accordance with the participant's individual plan of care, and subject to authorization pursuant to Section 14526, the following core services to each participant during each day of the participant's attendance at the center:</p> <p>(a) One or more of the following professional nursing services:</p> <p>(1) Observation, assessment, and monitoring of the participant's general health status and changes in his or her condition, risk factors, and the participant's specific medical, cognitive, or mental health condition or conditions upon which admission to the adult day health care center was based.</p> <p>(2) Monitoring and assessment of the participant's medication regimen, administration and recording of the participant's prescribed medications, and intervention, as needed, based upon the assessment and the participant's reactions to his or her medications.</p>	<p>Diagnostic and Statistical Manual of Mental Disorders, DSM IV TR, Fourth Edition, Text Revision (2000), published by the American Psychiatric Association:</p> <p>(a) Pervasive Developmental Disorders (except as covered through Regional Centers); (b) Attention Deficit and Disruptive Behavior Disorders; (c) Feeding &amp; Eating Disorder of Infancy or Early Childhood; (d) Elimination Disorders; (e) Other Disorders of Infancy, Childhood, or Adolescence; (f) Schizophrenia &amp; Other Psychotic Disorders; (g) Mood Disorders; (h) Anxiety Disorders; (i) Somatoform Disorders; (j) Factitious Disorders; (k) Dissociative Disorders; (l) Paraphilias; (m) Gender Identity Disorders; (n) Eating Disorders; (o) Impulse-Control Disorders Not Elsewhere Classified; (p) Adjustment Disorder; (q) Personality Disorder; or (r) Medication-Induced Movement Disorder</p>

## Community-Based Adult Services Eligibility Criteria

Category	Eligibility 14525	Medical Necessity 14526.1(d)(e)	Daily Core Services 14550.5	Additional References
<p><b>Category 2 (Cont.)</b></p>	<p>informal services outside of the adult day health care program to support the individual and his or her family or caregiver in the living arrangement of his or her choice and to avoid or delay the use of institutional services, including, but not limited to, hospital emergency department services, inpatient acute care hospital services, inpatient mental health services, or placement in a nursing facility or a nursing or intermediate care facility for the developmentally disabled providing continuous nursing care.</p> <p>(e) Notwithstanding the criteria established in subdivisions (a) to (d), inclusive, of this section, any person who is a resident of an intermediate care facility for the developmentally disabled-habilitative shall be eligible for adult day health care services if that resident has disabilities and a level of functioning that are of such a nature that, without supplemental intervention through adult day health care, placement to a more costly institutional level of care would be likely to occur.</p>	<p>subdivision (d). That assistance or supervision shall be in addition to any other nonadult day health care support the participant is currently receiving in his or her place of residence.</p> <p>(3) The participant's network of non-adult day health care center supports is insufficient to maintain the individual in the community, demonstrated by at least one of the following:</p> <p>(A) The participant lives alone and has no family or caregivers available to provide sufficient and necessary care or supervision.</p> <p>(B) The participant resides with one or more related or unrelated individuals, but they are unwilling or unable to provide sufficient and necessary care or supervision to the participant.</p> <p>(C) The participant has family or caregivers available, but those individuals require respite in order to continue providing sufficient and necessary care or supervision to the participant.</p> <p>(4) A high potential exists for the deterioration of the participant's medical, cognitive, or mental health condition or conditions in a manner likely to result in emergency department visits, hospitalization, or other institutionalization if adult day health care services are not provided.</p> <p>(5) The participant's condition or conditions require adult day health care services specified in subdivisions (a) to (d), inclusive, of Section 14550.5, on each day of attendance that are individualized and designed to</p>	<p>(3) Oral or written communication with the participant's personal health care provider, other qualified health care or social service provider, or the participant's family or other caregiver, regarding changes in the participant's condition, signs, or symptoms.</p> <p>(4) Supervision of the provision of personal care services for the participant, and assistance, as needed.</p> <p>(5) Provision of skilled nursing care and intervention, within scope of practice, to participants, as needed, based upon an assessment of the participant, his or her ability to provide self-care while at the adult day health care center, and any health care provider orders.</p> <p>(b) One or both of the following core personal care services or social services:</p> <p>(1) One or both of the following personal care services:</p> <p>(A) Supervision of, or assistance with, activities of daily living or instrumental activities of daily living.</p> <p>(B) Protective group supervision and interventions to assure participant safety and to minimize the risk of injury, accident, inappropriate</p>	

## Community-Based Adult Services Eligibility Criteria

Category	Eligibility 14525	Medical Necessity 14526.1(d)(e)	Daily Core Services 14550.5	Additional References
Category 2 (Cont.)		<p>maintain the ability of the participant to remain in the community and avoid emergency department visits, hospitalizations, or other institutionalization.</p> <p>(e) When determining whether a provider has demonstrated that a participant meets the medical necessity criteria, the department may enter an adult day health care center and review participants' medical records and observe participants receiving care identified in the individual plan of care in addition to reviewing the information provided on or with the TAR.</p>	<p>behavior, or wandering.</p> <p>(2) One or more of the following social services provided by the adult day health care center social worker or social worker assistant:</p> <p>(A) Observation, assessment, and monitoring of the participant's psychosocial status.</p> <p>(B) Group work to address psychosocial issues.</p> <p>(C) Care coordination.</p> <p>(c) At least one of the following therapeutic activities provided by the adult day health care center activity coordinator or other trained adult day health care center personnel:</p> <p>(1) Group or individual activities to enhance the social, physical, or cognitive functioning of the participant.</p> <p>(2) Facilitated participation in group or individual activities for those participants whose frailty or cognitive functioning level precludes them from active participation in scheduled activities.</p> <p>(d) One meal per day of attendance, in accordance with Section 54331 of Title 22 of the California Code of Regulations, unless the participant declines the meal or medical contraindications exist, as documented in the participant's health record,</p>	

## Community-Based Adult Services Eligibility Criteria

Category	Eligibility 14525	Medical Necessity 14526.1(d)(e)	Daily Core Services 14550.5	Additional References
<b>Category 2 (Cont.)</b>			that prohibit the ingestion of the meal.	
<p><b>Category 3</b> individuals:</p> <ul style="list-style-type: none"> <li>• Have moderate to severe Alzheimer's Disease or other Dementia characterized by the descriptors of, or equivalent to, Stages 5, 6, or 7 of Alzheimer's Disease <b>AND</b></li> <li>• Meet ADHC eligibility and medical necessity criteria contained in California Welfare and Institutions Code 14525(a),(c),(d),(e), 14526.1 (d)(1),(3),(4),(5), <b>AND</b> 14526.1 (e)</li> </ul>	<p>Any adult eligible for benefits under Chapter 7 (commencing with Section 14000) shall be eligible for adult day health care services if that person meets all of the following criteria:</p> <p>(a) The person is 18 years of age or older and has one or more chronic or postacute medical, cognitive, or mental health conditions, and a physician, nurse practitioner, or other health care provider has, within his or her scope of practice, requested adult day health care services for the person.</p> <p>(c) The person requires ongoing or intermittent protective supervision, skilled observation, assessment, or intervention by a skilled health or mental health professional to improve, stabilize, maintain, or minimize deterioration of the medical, cognitive, or mental health condition.</p> <p>(d) The person requires adult day health care services, as defined in Section 14550, that are individualized and planned, including, when necessary, the coordination of formal and informal services outside of the adult day health care program to support the individual and his or her family or caregiver in the living arrangement of his or her choice and to avoid or delay the use of institutional services, including, but not</p>	<p>(d) Except for participants residing in an intermediate care facility/developmentally disabled-habilitative, authorization or reauthorization of an adult day health care treatment authorization request shall be granted only if the participant meets all of the following medical necessity criteria:</p> <p>(1) The participant has one or more chronic or post-acute medical, cognitive, or mental health conditions that are identified by the participant's personal health care provider as requiring one or more of the following, without which the participant's condition will likely deteriorate and require emergency department visits, hospitalization, or other institutionalization:</p> <p>(A) Monitoring. (B) Treatment. (C) Intervention.</p> <p>(3) The participant's network of non-adult day health care center supports is insufficient to maintain the individual in the community, demonstrated by at least one of the following:</p> <p>(A) The participant lives alone and has no family or caregivers available to provide sufficient and necessary care or supervision. (B) The participant resides with one or more related or unrelated individuals, but they are unwilling or unable to provide sufficient and necessary care or</p>	<p>Adult day health care centers shall offer, and provide directly on the premises, in accordance with the participant's individual plan of care, and subject to authorization pursuant to Section 14526, the following core services to each participant during each day of the participant's attendance at the center:</p> <p>(a) One or more of the following professional nursing services:</p> <p>(1) Observation, assessment, and monitoring of the participant's general health status and changes in his or her condition, risk factors, and the participant's specific medical, cognitive, or mental health condition or conditions upon which admission to the adult day health care center was based.</p> <p>(2) Monitoring and assessment of the participant's medication regimen, administration and recording of the participant's prescribed medications, and intervention, as needed, based upon the assessment and the participant's reactions to his or her medications.</p>	<p><b>Alzheimer's Disease-Stages 5, 6, and 7 Characteristics:</b></p> <p><b>Stage 5:</b> Moderately severe cognitive decline. Major gaps in memory and deficits in cognitive function emerge. Some assistance with day-to-day activities becomes essential.</p> <p><b>Stage 6:</b> Severe cognitive decline. Memory difficulties continue to worsen, significant personality changes may emerge, and affected individuals need extensive help with daily activities.</p> <p><b>Stage 7:</b> Very severe cognitive decline. This is the final stage of the disease when individuals lose the ability to respond to their environment, the ability to speak, and, ultimately, the ability to control movement.</p>

## Community-Based Adult Services Eligibility Criteria

Category	Eligibility 14525	Medical Necessity 14526.1(d)(e)	Daily Core Services 14550.5	Additional References
<p><b>Category 3 (Cont.)</b></p>	<p>limited to, hospital emergency department services, inpatient acute care hospital services, inpatient mental health services, or placement in a nursing facility or a nursing or intermediate care facility for the developmentally disabled providing continuous nursing care.</p> <p>(e) Notwithstanding the criteria established in subdivisions (a) to (d), inclusive, of this section, any person who is a resident of an intermediate care facility for the developmentally disabled-habilitative shall be eligible for adult day health care services if that resident has disabilities and a level of functioning that are of such a nature that, without supplemental intervention through adult day health care, placement to a more costly institutional level of care would be likely to occur.</p>	<p>supervision to the participant.</p> <p>(C) The participant has family or caregivers available, but those individuals require respite in order to continue providing sufficient and necessary care or supervision to the participant.</p> <p>(4) A high potential exists for the deterioration of the participant's medical, cognitive, or mental health condition or conditions in a manner likely to result in emergency department visits, hospitalization, or other institutionalization if adult day health care services are not provided.</p> <p>(5) The participant's condition or conditions require adult day health care services specified in subdivisions (a) to (d), inclusive, of Section 14550.5, on each day of attendance that are individualized and designed to maintain the ability of the participant to remain in the community and avoid emergency department visits, hospitalizations, or other institutionalization.</p> <p>(e) When determining whether a provider has demonstrated that a participant meets the medical necessity criteria, the department may enter an adult day health care center and review participants' medical records and observe participants receiving care identified in the individual plan of care in addition to reviewing the information provided on or with the TAR.</p>	<p>(3) Oral or written communication with the participant's personal health care provider, other qualified health care or social service provider, or the participant's family or other caregiver, regarding changes in the participant's condition, signs, or symptoms.</p> <p>(4) Supervision of the provision of personal care services for the participant, and assistance, as needed.</p> <p>(5) Provision of skilled nursing care and intervention, within scope of practice, to participants, as needed, based upon an assessment of the participant, his or her ability to provide self-care while at the adult day health care center, and any health care provider orders.</p> <p>(b) One or both of the following core personal care services or social services:</p> <p>(1) One or both of the following personal care services:</p> <p>(A) Supervision of, or assistance with, activities of daily living or instrumental activities of daily living.</p> <p>(B) Protective group supervision and interventions to assure participant safety and to minimize the risk of injury, accident, inappropriate</p>	

## Community-Based Adult Services Eligibility Criteria

Category	Eligibility 14525	Medical Necessity 14526.1(d)(e)	Daily Core Services 14550.5	Additional References
Category 3 (Cont.)			<p>behavior, or wandering.</p> <p>(2) One or more of the following social services provided by the adult day health care center social worker or social worker assistant:</p> <p>(A) Observation, assessment, and monitoring of the participant's psychosocial status.</p> <p>(B) Group work to address psychosocial issues.</p> <p>(C) Care coordination.</p> <p>(c) At least one of the following therapeutic activities provided by the adult day health care center activity coordinator or other trained adult day health care center personnel:</p> <p>(1) Group or individual activities to enhance the social, physical, or cognitive functioning of the participant.</p> <p>(2) Facilitated participation in group or individual activities for those participants whose frailty or cognitive functioning level precludes them from active participation in scheduled activities.</p> <p>(d) One meal per day of attendance, in accordance with Section 54331 of Title 22 of the California Code of Regulations, unless the participant declines the meal or medical contraindications exist, as documented in the participant's health record,</p>	

## Community-Based Adult Services Eligibility Criteria

Category	Eligibility 14525	Medical Necessity 14526.1(d)(e)	Daily Core Services 14550.5	Additional References
<b>Category 3 (Cont.)</b>			that prohibit the ingestion of the meal.	
<p><b>Category 4</b> individuals:</p> <ul style="list-style-type: none"> <li>• Have mild Cognitive Impairment including Moderate Alzheimer's Disease or other Dementia characterized by the descriptors of, or equivalent to, Stage 4, Alzheimer's Disease; <b>AND</b></li> <li>• Meet ADHC eligibility and medical necessity criteria contained in California Welfare and Institutions Code 14525 and 14526.1(d) and (e); <b>AND</b></li> <li>• Notwithstanding sections 14525(b) and 14526.1(d)(2)(A) of the California Welfare and Institutions Code the individual must demonstrate a need for assistance or supervision with two of the following ADLs/IADLS: bathing, dressing, self-feeding, toileting, ambulation, transferring, medication management, and hygiene</li> </ul>	<p>Any adult eligible for benefits under Chapter 7 (commencing with Section 14000) shall be eligible for adult day health care services if that person meets all of the following criteria:</p> <p>(a) The person is 18 years of age or older and has one or more chronic or postacute medical, cognitive, or mental health conditions, and a physician, nurse practitioner, or other health care provider has, within his or her scope of practice, requested adult day health care services for the person.</p> <p>(b) The person has functional impairments in two or more activities of daily living, instrumental activities of daily living, or one or more of each, and requires assistance or supervision in performing these activities.</p> <p>(c) The person requires ongoing or intermittent protective supervision, skilled observation, assessment, or intervention by a skilled health or mental health professional to improve, stabilize, maintain, or minimize deterioration of the medical, cognitive, or mental health condition.</p> <p>(d) The person requires adult day health care services, as defined in Section 14550, that are individualized and planned, including, when necessary, the coordination of formal and</p>	<p>(d) Except for participants residing in an intermediate care facility/developmentally disabled-habilitative, authorization or reauthorization of an adult day health care treatment authorization request shall be granted only if the participant meets all of the following medical necessity criteria:</p> <p>(1) The participant has one or more chronic or post-acute medical, cognitive, or mental health conditions that are identified by the participant's personal health care provider as requiring one or more of the following, without which the participant's condition will likely deteriorate and require emergency department visits, hospitalization, or other institutionalization:</p> <p>(A) Monitoring. (B) Treatment. (C) Intervention.</p> <p>(2) The participant has a condition or conditions resulting in both of the following:</p> <p>(A) Limitations in the performance of two or more activities of daily living or instrumental activities of daily living, as those terms are defined in Section 14522.3, or one or more from each category. (B) A need for assistance or supervision in performing the activities identified in subparagraph (A) as related to the condition or conditions specified in paragraph (1) of</p>	<p>Adult day health care centers shall offer, and provide directly on the premises, in accordance with the participant's individual plan of care, and subject to authorization pursuant to Section 14526, the following core services to each participant during each day of the participant's attendance at the center:</p> <p>(a) One or more of the following professional nursing services:</p> <p>(1) Observation, assessment, and monitoring of the participant's general health status and changes in his or her condition, risk factors, and the participant's specific medical, cognitive, or mental health condition or conditions upon which admission to the adult day health care center was based. (2) Monitoring and assessment of the participant's medication regimen, administration and recording of the participant's prescribed medications, and intervention, as needed, based upon the assessment and the participant's reactions to his or her medications.</p>	<p><b>Alzheimer's Disease-Stage 4 Characteristics:</b></p> <ul style="list-style-type: none"> <li>• Decreased knowledge of recent events;</li> <li>• Impaired ability to perform challenging mental arithmetic;</li> <li>• Decreased capacity to perform complex tasks;</li> <li>• Reduced memory of personal history;</li> <li>• The affected individual may seem subdued and withdrawn, especially in socially or mentally challenging situations.</li> </ul>

## Community-Based Adult Services Eligibility Criteria

Category	Eligibility 14525	Medical Necessity 14526.1(d)(e)	Daily Core Services 14550.5	Additional References
<b>Category 4 (Cont.)</b>	<p>informal services outside of the adult day health care program to support the individual and his or her family or caregiver in the living arrangement of his or her choice and to avoid or delay the use of institutional services, including, but not limited to, hospital emergency department services, inpatient acute care hospital services, inpatient mental health services, or placement in a nursing facility or a nursing or intermediate care facility for the developmentally disabled providing continuous nursing care.</p> <p>(e) Notwithstanding the criteria established in subdivisions (a) to (d), inclusive, of this section, any person who is a resident of an intermediate care facility for the developmentally disabled-habilitative shall be eligible for adult day health care services if that resident has disabilities and a level of functioning that are of such a nature that, without supplemental intervention through adult day health care, placement to a more costly institutional level of care would be likely to occur.</p>	<p>subdivision (d). That assistance or supervision shall be in addition to any other nonadult day health care support the participant is currently receiving in his or her place of residence.</p> <p>(3) The participant's network of non-adult day health care center supports is insufficient to maintain the individual in the community, demonstrated by at least one of the following:</p> <p>(A) The participant lives alone and has no family or caregivers available to provide sufficient and necessary care or supervision.</p> <p>(B) The participant resides with one or more related or unrelated individuals, but they are unwilling or unable to provide sufficient and necessary care or supervision to the participant.</p> <p>(C) The participant has family or caregivers available, but those individuals require respite in order to continue providing sufficient and necessary care or supervision to the participant.</p> <p>(4) A high potential exists for the deterioration of the participant's medical, cognitive, or mental health condition or conditions in a manner likely to result in emergency department visits, hospitalization, or other institutionalization if adult day health care services are not provided.</p> <p>(5) The participant's condition or conditions require adult day health care services specified in subdivisions (a) to (d), inclusive, of Section 14550.5, on each day of attendance that are individualized and designed to</p>	<p>(3) Oral or written communication with the participant's personal health care provider, other qualified health care or social service provider, or the participant's family or other caregiver, regarding changes in the participant's condition, signs, or symptoms.</p> <p>(4) Supervision of the provision of personal care services for the participant, and assistance, as needed.</p> <p>(5) Provision of skilled nursing care and intervention, within scope of practice, to participants, as needed, based upon an assessment of the participant, his or her ability to provide self-care while at the adult day health care center, and any health care provider orders.</p> <p>(b) One or both of the following core personal care services or social services:</p> <p>(1) One or both of the following personal care services:</p> <p>(A) Supervision of, or assistance with, activities of daily living or instrumental activities of daily living.</p> <p>(B) Protective group supervision and interventions to assure participant safety and to minimize the risk of injury, accident, inappropriate</p>	

## Community-Based Adult Services Eligibility Criteria

Category	Eligibility 14525	Medical Necessity 14526.1(d)(e)	Daily Core Services 14550.5	Additional References
<b>Category 4 (Cont.)</b>		<p>maintain the ability of the participant to remain in the community and avoid emergency department visits, hospitalizations, or other institutionalization.</p> <p>(e) When determining whether a provider has demonstrated that a participant meets the medical necessity criteria, the department may enter an adult day health care center and review participants' medical records and observe participants receiving care identified in the individual plan of care in addition to reviewing the information provided on or with the TAR.</p>	<p>behavior, or wandering.</p> <p>(2) One or more of the following social services provided by the adult day health care center social worker or social worker assistant:</p> <p>(A) Observation, assessment, and monitoring of the participant's psychosocial status.</p> <p>(B) Group work to address psychosocial issues.</p> <p>(C) Care coordination.</p> <p>(c) At least one of the following therapeutic activities provided by the adult day health care center activity coordinator or other trained adult day health care center personnel:</p> <p>(1) Group or individual activities to enhance the social, physical, or cognitive functioning of the participant.</p> <p>(2) Facilitated participation in group or individual activities for those participants whose frailty or cognitive functioning level precludes them from active participation in scheduled activities.</p> <p>(d) One meal per day of attendance, in accordance with Section 54331 of Title 22 of the California Code of Regulations, unless the participant declines the meal or medical contraindications exist, as documented in the participant's health record,</p>	

## Community-Based Adult Services Eligibility Criteria

Category	Eligibility 14525	Medical Necessity 14526.1(d)(e)	Daily Core Services 14550.5	Additional References
<b>Category 4 (Cont.)</b>			that prohibit the ingestion of the meal.	
<p><b>Category 5</b> individuals:</p> <ul style="list-style-type: none"> <li>• Have Developmental Disabilities <b>AND</b></li> <li>• Meet the criteria for regional center eligibility (a disability meeting the definitions and requirements set forth in title 17, section 54001(a) of the CCR, as determined by a Regional Center under contract with DDS) <b>AND</b></li> <li>• Meet ADHC eligibility and medical necessity criteria contained in W&amp;I Code 14525(a),(c),(d),(e), 14526.1 (d)(1),(3),(4),(5) and 14526.1(e).</li> </ul>	<p>Any adult eligible for benefits under Chapter 7 (commencing with Section 14000) shall be eligible for adult day health care services if that person meets all of the following criteria:</p> <p>(a) The person is 18 years of age or older and has one or more chronic or postacute medical, cognitive, or mental health conditions, and a physician, nurse practitioner, or other health care provider has, within his or her scope of practice, requested adult day health care services for the person.</p> <p>(c) The person requires ongoing or intermittent protective supervision, skilled observation, assessment, or intervention by a skilled health or mental health professional to improve, stabilize, maintain, or minimize deterioration of the medical, cognitive, or mental health condition.</p> <p>(d) The person requires adult day health care services, as defined in Section 14550, that are individualized and planned, including, when necessary, the coordination of formal and informal services outside of the adult day health care program to support the individual and his or her family or caregiver in the living arrangement of his or her choice and to avoid or delay the use of institutional services, including, but not</p>	<p>(d) Except for participants residing in an intermediate care facility/developmentally disabled-habilitative, authorization or reauthorization of an adult day health care treatment authorization request shall be granted only if the participant meets all of the following medical necessity criteria:</p> <p>(1) The participant has one or more chronic or post-acute medical, cognitive, or mental health conditions that are identified by the participant's personal health care provider as requiring one or more of the following, without which the participant's condition will likely deteriorate and require emergency department visits, hospitalization, or other institutionalization:</p> <p>(A) Monitoring. (B) Treatment. (C) Intervention.</p> <p>(3) The participant's network of non-adult day health care center supports is insufficient to maintain the individual in the community, demonstrated by at least one of the following:</p> <p>(A) The participant lives alone and has no family or caregivers available to provide sufficient and necessary care or supervision. (B) The participant resides with one or more related or unrelated individuals, but they are unwilling or unable to provide sufficient and necessary care or</p>	<p>Adult day health care centers shall offer, and provide directly on the premises, in accordance with the participant's individual plan of care, and subject to authorization pursuant to Section 14526, the following core services to each participant during each day of the participant's attendance at the center:</p> <p>(a) One or more of the following professional nursing services:</p> <p>(1) Observation, assessment, and monitoring of the participant's general health status and changes in his or her condition, risk factors, and the participant's specific medical, cognitive, or mental health condition or conditions upon which admission to the adult day health care center was based.</p> <p>(2) Monitoring and assessment of the participant's medication regimen, administration and recording of the participant's prescribed medications, and intervention, as needed, based upon the assessment and the participant's reactions to his or her medications.</p>	<p><b>Title 17 Section 54001(a)</b> defined: A condition which results in major impairment of cognitive and/or social functioning, representing sufficient impairment to require interdisciplinary planning and coordination of special or generic services to assist the individual in achieving maximum potential; and the existence of significant functional limitations, as determined by the regional center, in three or more of the following areas of major life activity, as appropriate to the person's age:</p> <p>(A) Receptive and expressive language; (B) Learning; (C) Self-care; (D) Mobility; (E) Self-direction; (F) Capacity for independent living; (G) Economic self-sufficiency.</p>

## Community-Based Adult Services Eligibility Criteria

Category	Eligibility 14525	Medical Necessity 14526.1(d)(e)	Daily Core Services 14550.5	Additional References
<b>Category 5 (Cont.)</b>	<p>limited to, hospital emergency department services, inpatient acute care hospital services, inpatient mental health services, or placement in a nursing facility or a nursing or intermediate care facility for the developmentally disabled providing continuous nursing care.</p> <p>(e) Notwithstanding the criteria established in subdivisions (a) to (d), inclusive, of this section, any person who is a resident of an intermediate care facility for the developmentally disabled-habilitative shall be eligible for adult day health care services if that resident has disabilities and a level of functioning that are of such a nature that, without supplemental intervention through adult day health care, placement to a more costly institutional level of care would be likely to occur.</p>	<p>supervision to the participant.</p> <p>(C) The participant has family or caregivers available, but those individuals require respite in order to continue providing sufficient and necessary care or supervision to the participant.</p> <p>(4) A high potential exists for the deterioration of the participant's medical, cognitive, or mental health condition or conditions in a manner likely to result in emergency department visits, hospitalization, or other institutionalization if adult day health care services are not provided.</p> <p>(5) The participant's condition or conditions require adult day health care services specified in subdivisions (a) to (d), inclusive, of Section 14550.5, on each day of attendance that are individualized and designed to maintain the ability of the participant to remain in the community and avoid emergency department visits, hospitalizations, or other institutionalization.</p> <p>(e) When determining whether a provider has demonstrated that a participant meets the medical necessity criteria, the department may enter an adult day health care center and review participants' medical records and observe participants receiving care identified in the individual plan of care in addition to reviewing the information provided on or with the TAR.</p>	<p>(3) Oral or written communication with the participant's personal health care provider, other qualified health care or social service provider, or the participant's family or other caregiver, regarding changes in the participant's condition, signs, or symptoms.</p> <p>(4) Supervision of the provision of personal care services for the participant, and assistance, as needed.</p> <p>(5) Provision of skilled nursing care and intervention, within scope of practice, to participants, as needed, based upon an assessment of the participant, his or her ability to provide self-care while at the adult day health care center, and any health care provider orders.</p> <p>(b) One or both of the following core personal care services or social services:</p> <p>(1) One or both of the following personal care services:</p> <p>(A) Supervision of, or assistance with, activities of daily living or instrumental activities of daily living.</p> <p>(B) Protective group supervision and interventions to assure participant safety and to minimize the risk of injury, accident, inappropriate</p>	

## Community-Based Adult Services Eligibility Criteria

Category	Eligibility 14525	Medical Necessity 14526.1(d)(e)	Daily Core Services 14550.5	Additional References
Category 5 (Cont.)			<p>behavior, or wandering.</p> <p>(2) One or more of the following social services provided by the adult day health care center social worker or social worker assistant:</p> <p>(A) Observation, assessment, and monitoring of the participant's psychosocial status.</p> <p>(B) Group work to address psychosocial issues.</p> <p>(C) Care coordination.</p> <p>(c) At least one of the following therapeutic activities provided by the adult day health care center activity coordinator or other trained adult day health care center personnel:</p> <p>(1) Group or individual activities to enhance the social, physical, or cognitive functioning of the participant.</p> <p>(2) Facilitated participation in group or individual activities for those participants whose frailty or cognitive functioning level precludes them from active participation in scheduled activities.</p> <p>(d) One meal per day of attendance, in accordance with Section 54331 of Title 22 of the California Code of Regulations, unless the participant declines the meal or medical contraindications exist, as documented in the participant's health record,</p>	

## Community-Based Adult Services Eligibility Criteria

Category	Eligibility 14525	Medical Necessity 14526.1(d)(e)	Daily Core Services 14550.5	Additional References
Category 5 (Cont.)			that prohibit the ingestion of the meal.	