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REASON FOR THIS TRANSMITTAL

- State Law Change
- Federal Law or Regulation Change
- Court Order
- Clarification Requested by One or More Counties
- Initiated by CDSS

ALL COUNTY LETTER NO. 17-XX

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY IN-HOME SUPPORTIVE SERVICES PROGRAM MANAGERS

SUBJECT: CLARIFICATION ON AUTHORIZATION OF MEDICAL ACCOMPANIMENT IN THE IN-HOME SUPPORTIVE SERVICES PROGRAM

REFERENCES: [ALL COUNTY LETTER NO. 16-01 \(January 7, 2016\)](#); [ALL COUNTY LETTER NO. 14-82 \(November 25, 2014\)](#); [WELFARE AND INSTITUTIONS CODE SECTION 12300\(b\)](#); [TITLE 22, CALIFORNIA CODE OF REGULATIONS, SECTION 51323](#)

The purpose of this All County Letter (ACL) is to provide clarification regarding policies and procedures related to the authorization of Medical Accompaniment in the In-Home Supportive Services (IHSS) program. Specifically, counties have requested clarification on whether, and under what circumstances, Medical Accompaniment and associated wait time can be authorized for minor recipients. In addition, counties have requested guidance on the procedures for determining when Medical Accompaniment may not be authorized for an IHSS recipient because transportation is being provided through the Medi-Cal program.

BACKGROUND

Accompaniment to health care appointments and alternative resource sites is an allowable service in the IHSS program. [Welfare and Institutions Code section 12300\(b\)](#) specifies that, "Supportive services shall include...accompaniment by a provider when needed during necessary travel to health-related appointments and to alternative resource sites..." Manual of Policies and Procedures (MPP) section 30-757.15 specifies the conditions under which this service may be authorized:

Assistance by the provider is available for transportation when the recipient's presence is required at the destination and such assistance is necessary to accomplish the travel, limited to:

- .151 Transportation to and from appointments with physicians, dentists and other health practitioners.
- .152 Transportation necessary for fitting health related appliances/devices and special clothing.
- .153 Transportation under .151 and .152 above shall be authorized only after social service staff have determined that Medi-Cal will not provide transportation in the specific case.
- .154 Transportation to the site where alternative resources provide in-home supportive services to the recipient in lieu of IHSS."

As stated in [ACL No. 14-82](#), "Consistent with regulations, medical accompaniment should not be authorized simply to fill the recipient's need for transportation. Medical accompaniment should only be authorized when the recipient needs assistance with specific IHSS tasks during transportation and/or to and from the destination, as specified in statute and regulations."

As of the state's February 1, 2016 implementation of the United States Department of Labor's Final Rule on the Application of the Fair Labor Standards Act to Domestic Service, IHSS providers must now be paid, under certain circumstances, for wait time associated with accompaniment to medical appointments and alternative resource sites. A provider must be paid for wait time when he/she provides authorized Medical Accompaniment for a recipient and the provider is considered to be "engaged to wait," otherwise referred to as Wait Time-On Duty, meaning the provider is not performing work duties but he/she is unable to use the time effectively for his/her own purposes. Time a provider spends "waiting to be engaged," which means the individual is completely relieved from performing work duties and he/she has enough time to enable him/her to use the time effectively for his/her own purposes, is considered Wait Time-Off Duty and this time is not compensable.

Although, as noted above, program regulations allow for accompaniment to be provided to sites where services in lieu of IHSS are provided by alternative resources, such as Community Based Adult Services (CBAS) centers, while there may be exceptions, wait time associated with accompaniment to alternative resource sites generally would not be compensable because the duration of time a recipient would typically spend at such a location would be sufficient to allow the provider to be completely relieved of his/her duties so that he/she could engage in his/her own person business or activities. Thus, the wait time associated with accompaniment to alternative resource sites would, most often, be considered Wait Time-Off Duty.

Detailed information on policies relating to wait time and guidelines for determining whether a provider is considered to be “engaged to wait” versus “waiting to be engaged” can be found in [ACL No. 16-01](#).

AUTHORIZATION OF MEDICAL ACCOMPANIMENT FOR MINOR RECIPIENTS

A parent has a legal duty under the Family Code to provide care for his/her child. It is considered a parental responsibility to accompany a child to a medical appointment. Therefore, as a general rule, Medical Accompaniment may not be authorized for a minor recipient. However, under certain limited circumstances, Medical Accompaniment can be authorized. In order for Medical Accompaniment to be authorized for a minor recipient, each of the three following conditions must be met:

1. The minor recipient must have an extraordinary need.

An extraordinary need is one that is based on the functional impairment due to the minor’s disability and that is beyond what would normally be expected for a minor of that age.

2. The appointment(s) must be with a specialist doctor(s) or specialty clinic.

Medical Accompaniment may not be authorized for routine appointments with the recipient’s pediatrician/primary care physician, such as well-baby/child visits, annual check-ups, immunizations, visits related to common childhood illnesses/injuries, etc.

3. The minor recipient must have a need for an authorized IHSS task(s) to be performed for him/her during travel to/from or at the appointment.

As noted above, Medical Accompaniment is not intended to satisfy a recipient’s transportation needs. Rather, the provider’s presence must be required to perform one or more authorized IHSS services for the recipient during transit. For example, during travel to/from the medical appointment, the parent/provider could be providing Protective Supervision for a non-self-directing minor recipient or performing a Paramedical Services task for a minor recipient for whom these IHSS services have been authorized.

If all of the above conditions are not met, Medical Accompaniment may not be authorized in a minor recipient case.

Associated Wait Time

Because a parent would generally be expected to be in attendance for the entire length of the medical professional’s examination of the child in order to participate in a

discussion with the medical professional and make decisions regarding the child's medical care, the guidelines provided in ACL No. 16-01 for determining whether a provider is "engaged to wait" (Wait Time—On Duty) versus "waiting to be engaged" (Wait Time—Off Duty) during a medical appointment are not relevant in minor recipient cases. The parent/provider would be unable to effectively use the time during the medical appointment for his/her own purposes; therefore, the determination as to whether the parent/provider is "engaged to wait" is unnecessary.

As a general rule, when the conditions have been met to authorize Medical Accompaniment for a minor recipient, wait time would be allowed. However, there may be limited exceptions to this. For example, if the medical professional staff were to take physical charge of the minor recipient for a set period of time to perform a procedure and it allowed sufficient time for the parent/provider to conduct his/her own personal business/activities, then the parent/provider would be considered to be "waiting to be engaged" and the time would not be compensable.

PROCEDURES FOR DETERMINING WHEN TRANSPORTATION IS PAID UNDER MEDI-CAL PROGRAM

Under certain limited circumstances, non-emergency medical transportation may be provided to a recipient under the Medi-Cal program. Pursuant to [Title 22, California Code of Regulations, Section 51323](#) and the section of the Department of Health Care Services (DHCS) Medi-Cal Provider Manual pertaining to ground medical transportation, Medi-Cal rules specify that non-emergency medical transportation coverage is limited and only covered when a recipient's medical and physical condition does not allow the recipient to travel by bus, passenger car, taxicab or another form of public or private conveyance. Transportation is not covered if the care to be obtained is not a Medi-Cal benefit.

Pursuant to MPP section 30-757.153, Medical Accompaniment may be authorized for an IHSS recipient only after it has been determined that transportation is not being provided under the Medi-Cal program. As specified in [ACL No. 14-82](#), to comply with this regulation, counties are required to verify if transportation for the IHSS recipient is being provided by the Medi-Cal program:

The IHSS recipient must have an approved Treatment Authorization Request (TAR) on file with DHCS for non-emergency medical transportation, which is only covered subject to the written prescription of a physician, dentist or podiatrist.

Medi-Cal funded transportation includes a non-emergency ambulance, wheelchair van or litter van. If any of these TAR approved non-emergency modes of transportation has been approved by DHCS for the IHSS recipient to get to/from needed medical appointments, the IHSS program

will consider that the IHSS recipient's transportation needs have been met in accordance with MPP 30-757.153.

To determine whether non-emergency medical transportation is being covered under Medi-Cal, counties should follow the following procedures:

1. It is possible that the recipient/applicant may know whether the Medi-Cal program is providing for his/her non-emergency medical transportation needs. Therefore, at the time of the assessment or reassessment, the social worker should first inquire of the applicant/recipient whether his/her licensed health care professional (LCHP) has prescribed and submitted a TAR for non-emergency ambulance, wheelchair van or litter van to transport him/her to/from medical appointments.
2. If the applicant/recipient is unable to provide this information, the social worker may ask the individual to sign a release of information allowing the social worker to communicate directly with the LCHP to determine whether non-emergency medical transportation is being provided under the Medi-Cal program.
3. Finally, if the social worker is unable to determine this information by speaking with the LCHP, he/she may contact the DHCS Medi-Cal Benefits Telephone Service Center (TSC) at 1-800-541-5555, identify him/herself as an IHSS social worker and request to confirm if a non-emergency medical transportation TAR is on file for the IHSS recipient.

The TSC representatives will only be able to provide information for recipients whose IHSS is provided under the IHSS Plus Option (IPO), the Personal Care Services Program (PCSP), or the Community First Choice Option (CFCO). DHCS cannot provide information for IHSS applicants; the individual must be enrolled in IPO, PCSP or CFCO. In addition, because the IHSS-Residual (IHSS-R) program is not part of the Medi-Cal program, and state and federal law prohibit the release of Medi-Cal protected health information except for purposes directly related to the administration of Medi-Cal/Medicaid, TSC representatives will not be able to provide information on recipients whose IHSS is provided under IHSS-R.

No matter what means the social worker uses to determine whether or not the applicant's/recipient's non-emergency medical transportation is being covered under Medi-Cal, the worker should document it in the case notes in the Case Management, Information and Payrolling System (CMIPS) II.

Regardless of whether an applicant's/recipient's non-emergency medical transportation needs are being met through the Medi-Cal program or Medical Accompaniment is authorized as an IHSS service, the social worker, at the time of the assessment or reassessment, should assess for the service needs of the individual, e.g., ambulation,

transfer, dressing, etc., during transit to/from and/or at the medical appointment, and document and authorize the appropriate services in accordance with MPP section 30-761.27. In the event that the applicant's/recipient's Medi-Cal funded non-emergency medical transportation is discontinued at a later date, if the IHSS needs of the applicant/recipient have been appropriately documented, the social worker will then only need to authorize Medical Accompaniment for travel time to/from medical appointments and allowable wait time, as appropriate. All other IHSS service needs, including those needs related to medical appointments, will already have been accounted for in the authorization.

Questions and/or requests for clarification on the information transmitted in this ACL may be directed to the Adult Programs Division, Policy and Operations Bureau at (916) 651-5350.

Sincerely,

DEBBI THOMSON
Deputy Director
Adult Programs Division

c: CWDA