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Better care where it's needed most

Sustained Support: Continued Partnership to Ensure Resident Well-Being

Assisted Living for Medi-Cal Enrollees: Virtual Learning Series

August 21, 2025

Made possible by the California Health Care Foundation

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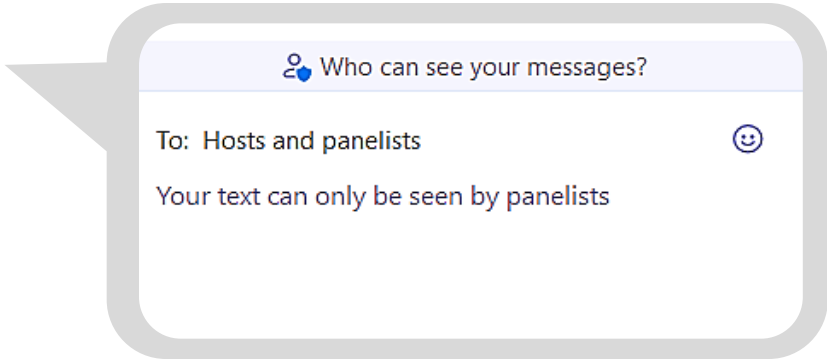

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Participation

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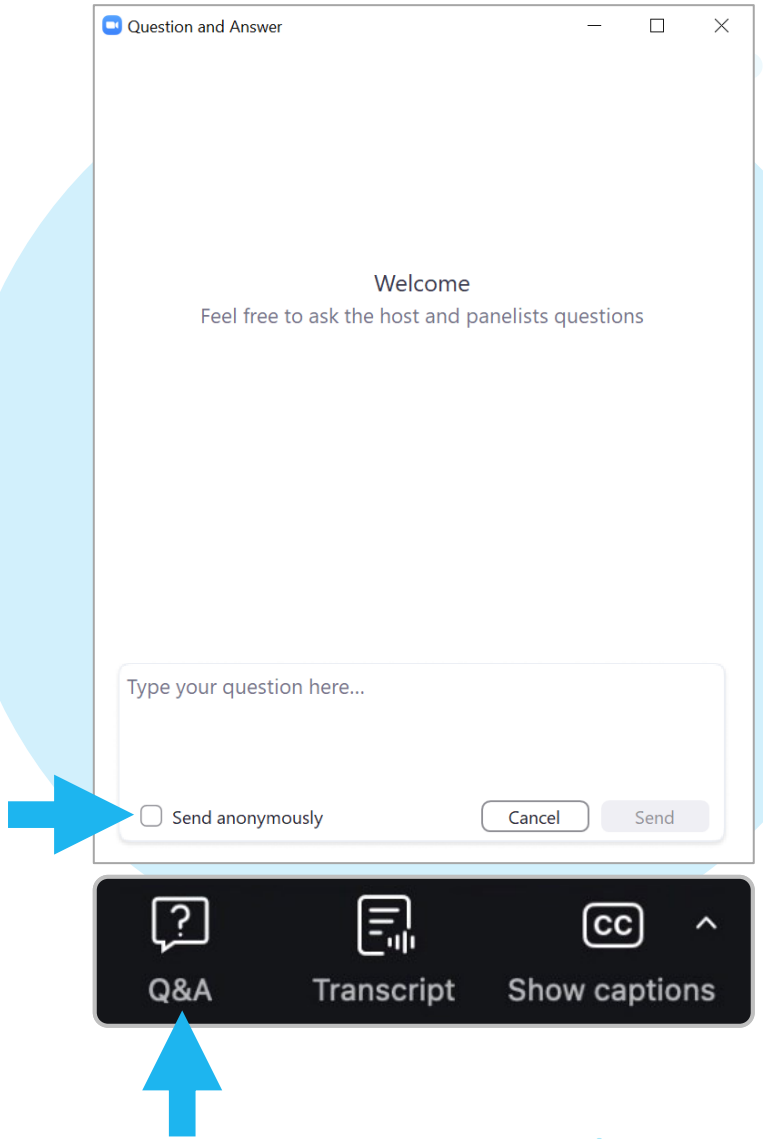

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Welcome & Introductions

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Meet the Team

Sarah Triano
Associate Director, Long-Term Services and Supports and Disability Policy
Center for Health Care Strategies

Zackiya Grant-Knight
Senior Program Officer
Center for Health Care Strategies

Torshira Moffett
Senior Program Officer
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Kate Meyers
Senior Program Officer, People-Centered Care
California Health Care Foundation

Emma Rauscher
Program Officer
Center for Health Care Strategies

Meryl Schulman
Senior Program Officer
Center for Health Care Strategies

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Assisted Living Virtual Learning Series Goals

- Explore opportunities to strengthen cross-sector partnerships to improve appropriate, timely, and effective use of assisted living communities for people with Medi-Cal and functional needs, including:
  - → Older adults and people with disabilities
  - → People with behavioral health needs
  - → People experiencing homelessness

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Assisted Living Journey Map

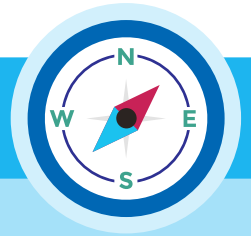
1. **Pre-Implementation: General Concerns and Solutions**

2. **Assessing Appropriateness for Assisted Living**

3. **Referral Before Accessing Services**

4. **Supports During Service Provision**

5. **What Comes Next?**



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Today's Objectives

- Learn about:
  - → Barriers to gaining/maintaining assisted living and strategies to address barriers
  - → Services assisted living residents may need and approaches for successful coordination
  - → Challenges unique to serving people with behavioral health needs
- Engage in cross-stakeholder discussions and identify opportunities for further collaboration

Meet Today's Speakers

Bo Buena
ECM Clinical Auditor
Kern Health Systems

Angela Kutnerian
Owner and Executive Vice President
Wellpointe, Inc

Schalon Woods
Housing Services Director
Housing Services Office, Housing & Homeless Services
Alameda County Health

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Agenda

- Welcome and Introductions
- Managing Income and Room and Board Payments: Barriers and Strategies to Support Assisted Living Residents
- Effective Coordination and Provision of Services for Assisted Living Residents
- Behavioral Health Services: Barriers and Strategies to Providing and Coordinating Effective Care in Assisted Living Settings
- Q&A

Key Barriers to Maintaining Assisted Living Placement

1. Room and Board Payment
2. Lack of Role Clarity
3. Residents' Needs Exceed Assisted Living Operators' Staffing Capacity

Barrier 1: Room and Board Payment

	Assisted Living (Non-Medical Care Model)
Assistance with ADLs and IADLs	**Covered** by Medi-Cal through Assisted Living Waiver, Community Support, or some other County-specific sources
Room and Board	**NOT Covered** by Medi-Cal *Resident responsibility
Average Cost in California	**$6,250/month** **For care, room and board**

**Sources: California Assisted Living Association, "Assisted Living in California."
California Association of Local Behavioral Health Boards and Commissions, "Adults Residential Facilities: The critical need for 'board and care' facilities."

Some Sources of Income to Pay for Room and Board in Assisted Living

- **Private pay**
- **Public sources:**
  - → Supplemental Security Income (SSI)/State Supplementary Payment (SSP)
  - → Behavioral Health Services Act Housing Interventions Fund
  - → County or City HUD Housing Choice Vouchers
  - → Regional Center funding

SSI/SSP

- Current combined state and federal SSI benefit amount in California
  - → **$1,182.94** individual; **$2,022.83** couple
- Special SSI benefit amount for someone in a Residential Care Facility for the Elderly (RCFE) (Non-Medical Out-of-Home Care (NMOHC))
  - → **$1,599.07** individual; **$3,198.14** couple in same RCFE
- Maximum allowable rate an RCFE can charge a Californian with SSI
  - → **$1,420.07** individual and **$2,840.14** couple in same RCFE

Advantage of NMOHC Benefit

Standard Monthly SSI Benefit Amount	$1,182.94 -	
Maximum allowable SSI rate an assisted living operator can charge	$1,420.07	
	-$237.13	How do assisted living residents make up the difference?

NMOHC Benefit Amount	$1599.07-	
Maximum allowable SSI rate an assisted living operator can charge	$1,420.07	
	+$179.00	$179 is the resident's **personal needs allowance** (how much the resident gets to keep)

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What is Medi-Cal "Shared Monthly Cost"?

- When you apply for Medi-Cal and are over the income limit for free Medi-Cal, you may still qualify for Medi-Cal with a "shared monthly cost."
  - → The amount you must pay each month toward medical related services, supplies, or equipment before Medi-Cal will pay.
- Assisted Living Waiver and Assisted Living Facility Transition Community Support are only available for Medi-Cal enrollees **without a share of cost**.
- Ways to reduce or eliminate shared monthly cost
  - → Board and care deduction

Source: CA Advocates for Nursing Home Reform (CANHR), "Understanding the Share of Cost for Medi-Cal," 5/16/2025, and "Board & Care Medi-Cal Deduction," 5/18/2025.

COUNTABLE INCOME CALCULATION	
Income	$2,600/month (social security and pension)
Allowed Income Deduction	- $20
	= $2,580

RCFE COST	
RCFE Cost	$2,500/month
Maintenance of Need for Medically Needy Program	-$600
	= $1,900

APPLY BOARD AND CARE DEDUCTION	
Income	**$2,580**
RCFE Cost	-$1,900
	= $680 (income used to determine shared monthly cost

SHARED MONTHLY COST	
Net Income (after all deductions)	**$680**
Maintenance of Need for Medically Needy Program	-$600
	= $80 (shared monthly cost)

Bo Buena

ECM Clinical Auditor, Kern Health Systems

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Assisted Living Myths and Misconception

- Assisted living is the same as a nursing home
- Assisted living means losing independence
- Once you're in, you can’t leave
- It’s just like a hospital — cold and clinical
- Families put their loved ones in assisted living and forget about them
- It’s too expensive for most people

Key Barriers in Assisted Living

- Out-of-pocket cost
- Overhead expenses
- Assisted living waiver
- Social security income
- Allowance
- Limited resources

Resources

- ALW or 1915c waiver
- Managed care plans or Community Supports (CalAIM)
- SSI or SSDI
- Personal assets, pension or retirement, and life insurance policies.

Barrier 2: Lack of Role Clarity

Core Assisted Living Services

- Assistance with activities of daily living (ADLs) and instrumental activities of daily living (IADLs)
- Coordination of health care
- Medication management
- Observation and oversight
- Assistance with transportation
- Social/recreational activity supports
- Physical activity supports

Specialized Assisted Living Services

- Licensed nurses on staff
- Dementia care, secured perimeters
- Diabetes management programs
- Coordination of end-of-life care
- Mental health/behavioral health programs

Barrier 2: Lack of Role Clarity

- What is the role of each in coordinating, managing, providing, and/or ensuring the quality of services?
  - → Enhanced Care Management and Community Support providers, the Hub, the care coordination agency, developmental disability case manager?
  - → The assisted living operator?
  - → The Medi-Cal managed care plan?
  - → The county, behavioral health, aging, disability, or homelessness service provider?
  - → Third-party provider hired by the resident?
- Is there a care management lead throughout the entire process? If so, who? How is that communicated?
- Who does an assisted living operator go to for help with complex issues?

Angela Kutnerian

Owner and Executive Vice President, Wellpoint, Inc.

Who We Are

- Leading provider of affordable, boutique-style residential assisted living and related healthcare services. Specializes in offering a coordinated and integrated system of care to high-acuity older adults with multiple chronic illnesses, including Alzheimer's and other dementia.
- Led by 2nd-generation providers
- Operate 50 locations across Fresno, Los Angeles, Irvine, and Mission Viejo. Brands include Fresno Guest Homes, Cottages at The Colony, Irvine Cottages, and Granny's Place.
- ALW provider for almost 15 years
- CalAIM Community Supports Provider
- Provider for PACE

Wellpointe

Live Better. Live Well.

Coordination At Our Core

- **Coordination of care and services provides a higher quality of life**
  - → Coordination with other providers
  - → Enhanced Care Management
  - → Assisted Living Waiver: Care Coordination Agencies
  - → Primary Care Physicians
  - → Medical Specialists
  - → Home Health and Hospice Agencies
  - → Adult Day Health Care
  - → County Behavioral Health
  - → Outpatient Physical Therapy

Wellpointe

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Coordination At Our Core

- **Day-to-Day Coordination**
  - → Scheduling appointments
  - → Scheduling transportation (Calmotiv)
  - → Durable Medical Equipment (DME)
  - → Providing appointment escorts, if needed
  - → Pharmacy services
  - → Labs and radiology
  - → Assistance with advance health care directives
  - → Assistance with Medi-Cal, SSI, and SSDI applications
- **Rome wasn't built in a day**

Barrier 3: Residents' Needs Exceed Assisted Living Operators' Capacity

- RCFE's are prohibited from serving people with disabilities that have:
  - → Stage 3 and 4 pressure sores; gastrostomy care; naso-gastric tubes; staph infection or other serious infection; a need for assistance with *all* ADLs; and tracheotomies.
- Operators that meet licensing requirements can offer services to persons with **dementia**.
- 10.4% of Adult Residential Facility (ARF) residents in Los Angeles County transferred from in-patient **mental health** or residential facilities, compared to 2.1% in RCFEs.
- Some ARFs receive **financial "patches"** from counties for enhanced mental health services.
- Out of the 1,123 ALW facilities in California as of July 14, 2025, only 9 (0.8%) are designated as "Mental Health Facilities," — all located in Los Angeles and none are RCFEs.
- **Re-appraisal requirements** effective January 1, 2025, for resident "behavioral expressions"

Schalon Woods

Housing Services Director, Housing Services Office,
Housing & Homeless Services, Alameda County Health

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Housing and Homelessness Housing Support Program

1900 EMBARCADERO STE 206
OAKLAND, CA 94606
510-567-8001

Housing Support Program (HSP)

- AC Behavioral Health Dept fund 330 beds in licensed board and care homes for individuals stepping down from sub acute facilities (Villa, Gladman and Morton Bakar) AND Programs under the Public Guardian Office: Murphy Clients and Community Conservatorship Program). Facilities are in Berkeley, Oakland, San Leandro, Hayward and Fremont.
- 9 Adult Residential Facilities (ARFs)
- 12 Residential Care for the Elderly (RCFEs)
- Tier Level of Care: Tier 1 basic board and care rate.
- Tier 2 one documented age-related or physical health care need.
- Tier 3 at least two documented age-related or physical health care needs.
- Tier 4a (oxygen, cpap machine, wound care stage 1 and dementia care waiver)
- Tier 4b (24 hr bedside care, Hospice care) New FY 25-26

HSP Criteria, Referral Process, and Supports

- HSP partnership includes Alameda County Behavioral Health and its contract partners. Full Services Partnerships (FSP) and services teams.
- Public Guardians are strong partners in care and coordination
- HSP leverages MediCAL services Enhanced Care Management (ECM) to support vulnerable adults with health care needs.

Q&A

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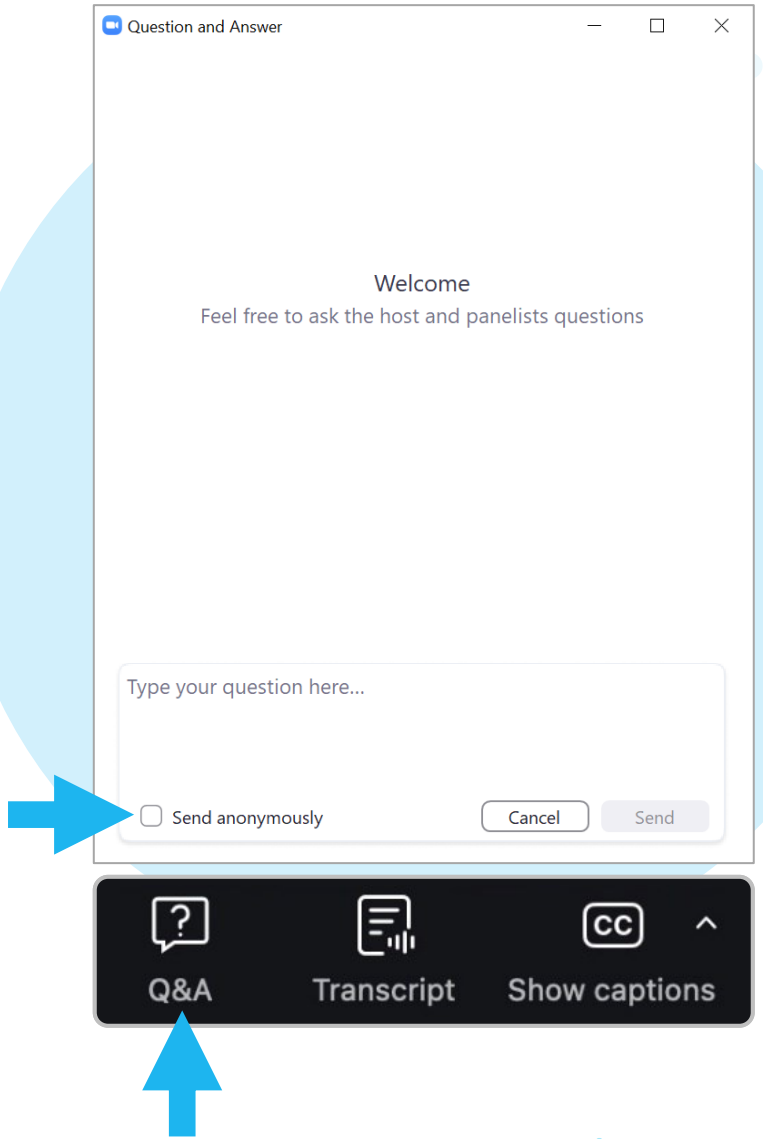

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Wrap-Up and Next Steps

Assisted Living for Medi-Cal Enrollees: Virtual Learning Series

- **August**
  - → ***Evaluation***
- **September**
  - → *Final session in the series: What Comes Next?*

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Resources

- Assisted Living Virtual Learning Series Page: https://www.chcs.org/resource/assisted-living-for-medi-cal-enrollees-virtual-learning-series/
- Acronym List: https://www.chcs.org/media/Assisted-Living-Virtual-Learning-Series-Acronym-List.pdf
- Virtual Learning Series FAQs: https://www.chcs.org/media/Assisted-Living-for-Medi-Cal-Enrollees-FAQs.pdf
- California Assisted Living Association, "RCFEs By the Numbers."
- California Association of Local Behavioral Health Boards and Commissions, "Adults Residential Facilities: The critical need for 'board and care' facilities."
- Community Supports Policy Guide Volume 2, April 2025
- California Advocates for Nursing Home Reform (CANHR) resource sheets on SSI/SSP and NMOHC and Board & Care Deductions.

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