



## Medical Necessity Guideline

<b>Medical Necessity Guideline (MNG) Title: Group Adult Foster Care</b>		
<b>MNG #: 75</b>	<input checked="" type="checkbox"/> SCO <input checked="" type="checkbox"/> One Care	<b>Prior Authorization Needed?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Clinical:</b> <input checked="" type="checkbox"/>	<b>Operational:</b> <input type="checkbox"/>	<b>Informational:</b> <input type="checkbox"/>
<b>Medicare Benefit:</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Approval Date:</b> 7/1/2021	<b>Effective Date:</b> 9/28/2021
<b>Last Revised Date:</b>	<b>Next Annual Review Date:</b> 7/1/2022	<b>Retire Date:</b>

### OVERVIEW:

Group Adult Foster Care (GAFC) program is a MassHealth program that provides personal care services in either a community or assisted living setting to individuals who are elderly and/or disabled. GAFC provides assistance with Activities of Daily Living (ADLs), nursing oversight and care management. Individuals must meet the criteria and guidelines set forth by MassHealth and reside in a certified GAFC Assisted Living Residence or elderly/disabled personal care services in a protected housing environment. Group Adult Foster Care (GAFC) services are based upon an individual plan of care and include: assistance with Activities of Daily Living (ADLs), Instrumental Activities of Daily Living (IADLs), and other personal care as needed, nursing services and oversight and care management. Thus, GAFC has two components: interdisciplinary care management provided by an RN and a care coordinator AND daily personal care. The member usually receives 1 hour of personal care for each authorized day of GAFC. The interdisciplinary care team must conduct at least 1 monthly home visit.

Members enrolled in the Group Adult Foster Care Program typically live in assisted-living residences or subsidized group housing. Members receive assistance with ADLs and IADLs from GAFC aides for one to two hours each day. GAFC providers also employ nurses and case managers who meet with members at least once every two months to develop and revise member-specific care plans.

GAFC provides room, board and personal care services for the elderly, disabled or individuals who are at risk for institutional placement in government-subsidized housing including rest homes, i.e., a facility or distinct units licensed as level IV by the DPH under 105 CMR 150.000: Licensing of Long-term Care Facilities that are not certified to participate in Medicare or Medicaid and that provides a protective living environment and minimum basic care. Note: Houses are not rest homes.

**The Multidisciplinary Professional Team (MDT)** is a team employed or contracted by the Adult Foster Care (AFC) provider, including but not limited to, a program director, a registered nurse, and an AFC care manager, and which may also include a community health worker, that works in conjunction with the AFC caregiver.

### DECISION GUIDELINES:

**Clinical Eligibility:** In order to be eligible for GAFC, the member must have a medical, cognitive, or behavioral-health related condition that impairs his/her ability to independently complete ADLs. (An Introduction to Mass Health Long Term Services and Supports and Other Covered Services, September 25, 2018.)



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- Bathing when the member requires either direct care or constant supervision and cueing during the entire activity;
- Dressing when the member requires either direct care or constant supervision and cueing during the entire activity;
- Toileting, bladder or bowel, when the member is incontinent of bladder or bowel or requires scheduled assistance or routine catheter or colostomy care;
- Transfers when the member must be assisted or lifted to another position (i.e., physical assistance);
- Ambulation when the member must be physically steadied, assisted, or guided in ambulation, or is unable to self-propel a wheelchair appropriately without the assistance of another person; and
- Eating when the member requires constant supervision and cueing during the entire meal, physical assistance by the staff with a portion of, or the entire meal.



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### Determination of need:

In order to receive GAFC the member must have a medical, cognitive, or behavioral-health related disability such that he or she requires daily personal care; the health and psychosocial oversight of a provider's multidisciplinary team; and be at imminent risk of institutional placement.

### LIMITATIONS/EXCLUSIONS:

#### Exclusions:

- GAFC may not be combined with Adult Foster Care, Chore, Companion, Homemaker, Laundry, Personal Care, PCA (Personal Care Attendant), Home Health Aide or Supportive Home Care Aide. There are no exceptions to these restrictions.

#### Limitations

- Must be provided in a protected housing environment, such as elderly, subsidized or supportive housing.
- GAFC is limited to 1 unit per day.
- Adult Day Health may be authorized up to two days per week
- Member cannot be inpatient status at a hospital, nursing facility, or intermediate care facility for people with intellectual disabilities or certain other residential facilities subject to state licensure or certification.

### KEY CARE PLANNING CONSIDERATIONS:

If the member meets the clinical eligibility standard, but does not require the specific features of GAFC, ADL and other needs must be met through other long-term services, such as agency personal care.

### AUTHORIZATION:

GAFC requires prior authorization. Authorization decisions must be made on the basis of an in-person assessment of the member by a CCA nurse practitioner, physician assistant, or registered nurse. (Contract RNs assessments may not be used for the purpose of determining clinical eligibility for GAFC.)

Service plans are generally 5-7 days per week.

H0043 Supportive Housing (Group Adult Foster Care) per day



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### REGULATORY NOTES:

1. 130 CMR 408.00 MassHealth Adult Foster Care regulations
2. Commonwealth of Massachusetts Executive Office of Health and Human Services office of Long Term Services and Supports, Letter to Great Lynn Senior Services, GAFC Providers, May8, 2013
3. MassHealth Group Adult Foster Care Guidelines (1991)
4. Office of Medicaid (MassHealth) – review of paid claims within MassHealth’s Adult Foster Care and Group Adult Foster Care programs – January 1, 2019 – June 30, 2015
5. The state auditor’s office has found that MassHealth does not have regulations governing the GAFC program and relies on a set of sub-regulatory guidelines to communicate program standards and requirements to GAFC providers. The Group Adult Foster Care Guidelines require GAFC providers to ensure “that all regulations and guidelines of MassHealth for the Adult Foster Care Program re met” for the GAFC program as well. (page 12 in Medicaid (MassHealth) – Review of Paid Claims within MassHealth’s Adult Foster Care and Group Adult Foster Care Programs
6. Department of Public Health 105 CMR 150.000

Note: MassHealth lacks specific regulations and clear guidelines for GAFC as most language found in MassHealth is related to AFC not GAFC

### RELATED REFERENCES:

This MNG guide is not a rigid rule. CCA has the mission to address all of our complicated members’ health needs. Care partners can identify members with Behavioral Health and HOPE (\*) challenges who may benefit from extending these guidelines to support our at-risk members’ unique health challenges. CCA encourages our clinicians to clearly document our members’ unique health contexts when requesting care which does not meet this formal MNG’s conditions and recommendations.

\*High Opiate Patient Engagement = members with high doses of opiates whom we hope to help by treating their pain alternatively and reducing their exposure to dangerous opiates.

### ATTACHMENTS:

EXHIBIT A	
EXHIBIT B	



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### REVISION LOG:

REVISION DATE	DESCRIPTION

### APPROVALS:

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7/1/2021

**Date**

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