

**CS Environmental Accessibility Adaptations
(EAA/Home Modifications)
Physician Request Form**

Environmental Accessibility Adaptations (EAA), also known as Home Modifications, are physical adaptations to a home that are necessary to ensure the health, welfare, and safety of the individual, or enable the individual to function with greater independence in the home: without which the Member would require institutionalization.

Individuals are directly responsible for paying their own living expenses.

Send the completed referral via secure fax to: (800) 811-4804.

Eligibility Criteria:		
Molina Enrollment: <input type="checkbox"/> Medi-Cal with Molina	Date of Request: Enter Date	
Member Information:		
Member Name:	DOB:	
Medi-Cal ID:	Preferred Language:	
Service Address:		
City:	State:	Zip Code:
Home Phone Number:	Cell Phone Number:	
Alternate Contact Name:	Phone #:	
Requesting Provider/Facility:		
PCP Name:	PCP Phone Number:	
Office Address:	PCP Fax Number:	
City:	State:	Zip Code:
PCP Signature:	Date:	

Select Requested Equipment or Service:
<input type="checkbox"/> Wheelchair Ramp (accessing the home)
<input type="checkbox"/> Grab Bars
<input type="checkbox"/> Stair Lift
<input type="checkbox"/> Doorway Widening (for members who require wheelchair)
<input type="checkbox"/> Bathroom and shower accessibility (i.e. constructing a roll-in shower)
<input type="checkbox"/> Personal Emergency Response System (PERS) (for members who are alone for significant parts of the day without a caregiver)
<input type="checkbox"/> Other (please describe): Click or tap here to enter text.
Please provide a brief written evaluation, describing how the equipment or service meets the needs of the member. Please send clinical notes and any supporting documentation (if applicable):
Click or tap here to enter text.
Supporting Diagnosis Code and Description
Diagnosis Code: Click or tap here to enter text. Description: Click or tap here to enter text.
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