MOLINA HEALTHCARE

CS Community Transition Services
All Counties

Community Transition Services/Nursing Facility Transition to a Home Community Supports (CS) helps members who have been living in a skilled nursing facility to live in the community and avoid further institutionalization by supporting members with becoming newly housed and covering nonrecurring setup expenses.

Community Transition Services do not include monthly rental or mortgage expense, food, regular utility charges, and/or household appliances or items that are intended for purely diversionary/recreational purposes.
Send the completed referral via secure fax to: (800) 811-4804.

Eligibility Criteria:
Molina Enrollment: ☐ Medi-Cal with Molina
☐ **Member must meet all the following criteria:** • Member is currently receiving medically necessary nursing facility level of care (LOC) services and in lieu of remaining in the nursing facility or Medical Respite setting, is choosing to transition home and continue to receive medically necessary nursing facility LOC services. • Member lives 60+ days in a nursing home and/or Medical Respite setting. • Member is interested in moving back to the community. • Member is able to reside safely in the community with appropriate and cost-effective supports and services.
☐ Member is not receiving duplicative support from other State, local, or federally funded programs.
☐ Member consented to Community Transition Services referral and acknowledges the once in a lifetime restriction.

Requestor Information:	
Referrer: ☐ Hospital/SNF ☐ PCP/Clinic ☐ IPA ☐ ECM ☐ Molina CM ☐ Other:	
Referrer Organization Name:	
Referrer Name:	Title:
Referrer Phone Number:	Fax Number:

Member Information:	
Member Name:	DOB:
Medi-Cal ID:	Preferred Language:
Cell Phone Number:	
Current SNF Name:	
Current SNF Address:	
SNF Contact Name:	Title:
Phone Number:	Fax Number:

If member has previously received Community Transition Services/Nursing Facility Transition to a Home Community Supports services, please include information explaining what reasons compelled the member to move from a provider-operated living arrangement to a living arrangement in a private residence through circumstances beyond his or her control.