



CenCalHEALTH®
Local. Quality. Healthcare.

Community Support FAQs



What are Community Supports services?

Community Supports services are optional services or settings that can be offered to a member in place of a services or settings covered under the Medicaid State Plan. These services should be medically appropriate and cost-effective alternatives.

How do you refer to a Community Support Service?

You can review the eligibility criteria for each Community Support Service by accessing the Information and Referral form. If you find that a member maybe eligible, complete the appropriate Information and Referral form.

For contracted CS providers:

Submit a TAR (50-1) authorization request through the Provider Portal attaching the corresponding Information and Referral form.

If you are not a contracted CS provider, fax the Information and Referral form to (805) 681-3039, or call the Community Supports Unit at (805) 562-1698.

If a Member or their Authorized Representative (AR) would like to self-refer to a community Support, they can contact Member Services to learn more. Our Call Center is available to assist Member's Monday through Friday, 8 a.m. to 5 p.m. at our toll-free number: **1-877-814-1861**. Or, for member's that cannot hear or speak well, please call California Relay at 711 or TTY: 1-833-556-2560.

What number can CenCal Health Providers call should they have questions about Community Supports services?

For General questions about the Community Support Services or if you're interested in becoming a contracted provider, contact the provider Services Team at (805) 562-1676.

For questions about submitting authorizations, and authorizations status, please contact the Community Support Team at (805) 562-1698.



Community Support **FAQs**

What is the referral approval turn-around time?

- Standard - 5 to 7 business days
- Expedited – 24 to 72 hours

How do I become a Community Supports Provider?

Contact the Provider Relations Team via email at ECM & CS Inquiries ecmandcs@cencalhealth.org.

Does a member need to have Medi-Cal and/or Medicare in order to qualify for Community Supports services?

Community Supports services are available for both lines of business (LOBs) if Member meets criteria.

What type of Community Supports services is CenCal Health offering?

- Medically Tailored Meals
- Recuperative Care
- Housing Transition Navigation Services
- Housing Deposits
- Housing Tenancy and Sustaining Services
- Sobering Centers

Where can I access Community Supports information on the CenCal Health website?

The Community Supports page can be found at: [CalAIM | CenCal Health Insurance Santa Barbara and San Luis Obispo Counties](#). www.cencalhealth.org/providers/calaim/

Can I submit multiple referrals for one Member?

Yes, based on program eligibility.

Is this benefit limited to certain Provider types?

Yes, only contracted Community Supports Providers may provide these services.

Will the status of referral (if approved or not approved) be communicated back to the Member's PCP or Home Health Team?

Yes, the referring provider and Community Supports provider will receive notice through the Provider Portal.



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Is there criteria for each service?

Yes, each program's criteria are located in the provider manual and member handbook.

Are there specific SDOH screenings that CS providers must use?

Yes. DHCS issued a list of comprehensive SDOH codes to maximize the capture of actionable information. Please use the following link to view the SDOH codes which allow CenCal Health to better track our Members' needs and find solutions to help them thrive:

www.cencalhealth.org/providers/social-determinants-of-health/

What is CenCal Health's Payer EDI #?

For more information on submitting claims electronically to CenCal Health, please visit <https://www.cencalhealth.org/providers/claims/>

www.cencalhealth.org/providers/claims/

The tab on the spreadsheet labeled "Batch Claims" has the info.

How does a provider sign up for Electronic Remittance (ERA)?

Email edi@cencalhealth.org

